



LIFE AND ACCIDENT AND HEALTH COMPANIES—ASSOCIATION EDITION

ANNUAL STATEMENT
FOR THE YEAR ENDED DECEMBER 31, 2008
OF THE CONDITION AND AFFAIRS OF THE
HumanaDental Insurance Company

NAIC Group Code	0119	0119	NAIC Company Code	70580	Employer's ID Number	39-0714280
	(Current Period)	(Prior Period)				
Organized under the Laws of	Wisconsin			State of Domicile or Port of Entry	Wisconsin	
Country of Domicile	United States					
Incorporated/Organized	01/01/1908			Commenced Business	10/12/1908	
Statutory Home Office	1100 Employers Boulevard			DePere, WI 54115		
	(Street and Number)			(City or Town, State and Zip Code)		
Main Administrative Office	1100 Employers Boulevard			DePere, WI 54115	920-336-1100	
	(Street and Number)			(City or Town, State and Zip Code)	(Area Code) (Telephone Number)	
Mail Address	PO Box 740036			Louisville, KY 40201-7436		
	(Street and Number or P.O. Box)			(City or Town, State and Zip Code)		
Primary Location of Books and Records	1100 Employers Boulevard			DePere, WI 54115	920-336-1100	
	(Street and Number)			(City or Town, State and Zip Code)	(Area Code) (Telephone Number)	
Internet Website Address	www.humana.com					
Statutory Statement Contact	Cathy Staebler			502-580-2712		
	(Name)			(Area Code) (Telephone Number) (Extension)		
	cstaebler@humana.com			502-580-2099		
	(E-mail Address)			(FAX Number)		

OFFICERS

Name	Title	Name	Title
Gerald Lawrence Ganoni	President	Joan Olliges Lenahan	Vice President and Secretary
James Harry Bloem	Sr. VP, CFO & Treasurer	Frank Murray Amrine	Appointed Actuary

OTHER OFFICERS

George Grant Bauernfeind	Vice President	John Gregory Catron	Vice President
Jonathan Thomas Lord M.D.	Sr. Vice President	John Edward Lumpkins #	Vice President
Mark Matthew Matzke	Chief Operating Officer	Kathleen Stephenson Pellegrino	Vice President & Asst. Secretary
Gilbert Alan Stewart #	Vice President	William Joseph Tait	Vice President
Gary Dean Thompson	Vice President		

DIRECTORS OR TRUSTEES

James Harry Bloem	Jonathan Thomas Lord M.D.	Michael Benedict McCallister	James Elmer Murray
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State ofKentucky.....

County ofJefferson..... ss

The officers of this reporting entity, being duly sworn, each depose and say that they are the described officers of said reporting entity, and that on the reporting period stated above, all of the herein described assets were the absolute property of the said reporting entity, free and clear from any liens or claims thereon, except as herein stated, and that this statement, together with related exhibits, schedules and explanations therein contained, annexed or referred to is a full and true statement of all the assets and liabilities and of the condition and affairs of the said reporting entity as of the reporting period stated above, and of its income and deductions therefrom for the period ended, and have been completed in accordance with the NAIC Annual Statement Instructions and Accounting Practices and Procedures Manual except to the extent that: (1) state law may differ; or, (2) that state rules or regulations require differences in reporting not related to accounting practices and procedures, according to the best of their information, knowledge and belief, respectively. Furthermore, the scope of this attestation by the described officers also includes the related corresponding electronic filing with the NAIC, when required, that is an exact copy (except for formatting differences due to electronic filing) of the enclosed statement. The electronic filing may be requested by various regulators in lieu of or in addition to the enclosed statement.

Gerald Lawrence Ganoni President	Joan Olliges Lenahan Vice President and Secretary	James Harry Bloem Sr. VP, CFO & Treasurer
a. Is this an original filing? Yes [X] No []		
b. If no,		
1. State the amendment number		
2. Date filed		
3. Number of pages attached		

Subscribed and sworn to before me this 17th day of February, 2009

Myra Carpenter, Notary Public
August 9, 2009



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Alabama

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	48,880				48,880
2. Annuity considerations	30,387				30,387
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	79,267	0	0	0	79,267
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	173,458				173,458
10. Matured endowments	2,000				2,000
11. Annuity benefits	285				285
12. Surrender values and withdrawals for life contracts	155,721				155,721
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	331,464	0	0	0	331,464
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	1,643	0	0	0	0	0	0	0	1,643
17. Incurred during current year	7	176,599							7	176,599
Settled during current year:										
18.1 By payment in full	9	175,458							9	175,458
18.2 By payment on compromised claims									0	0
18.3 Totals paid	9	175,458	0	0	0	0	0	0	9	175,458
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	9	175,458	0	0	0	0	0	0	9	175,458
19. Unpaid Dec. 31, current year (16+17-18.6)	(2)	2,785	0	0	0	0	0	0	(2)	2,785
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	341	5,326,547	0	0	0	0	0	0	341	5,326,547
21. Issued during year									0	0
22. Other changes to in force (Net)	(50)	(1,517,772)							(50)	(1,517,772)
23. In force December 31 of current year	291	3,808,775	0	0	0	0	0	0	291	3,808,775

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	583,163	588,204		395,838	400,776
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	141,805	141,805		68,460	69,594
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	141,805	141,805	0	68,460	69,594
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	724,968	730,009	0	464,298	470,370

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products2,153 and number of persons insured under
Indemnity only products318



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Alaska

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,401				2,401
2. Annuity considerations	40				40
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	2,441	0	0	0	2,441
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	243				243
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	243	0	0	0	243
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	243	0	0	0	243
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	25	281,075	0	0	0	0	0	0	25	281,075
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	25	281,075	0	0	0	0	0	0	25	281,075

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	1,163,744	1,173,803		789,922	799,776
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,163,744	1,173,803	0	789,922	799,776

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products1,180 and number of persons insured under
Indemnity only products1,085



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF American Samoa

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					.0
2. Annuity considerations					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					.0
6.2 Applied to pay renewal premiums					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					.0
6.4 Other					.0
6.5 Totals (Sum of 6.1 to 6.4)	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit					.0
7.2 Applied to provide paid-up annuities					.0
7.3 Other					.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					.0
10. Matured endowments					.0
11. Annuity benefits					.0
12. Surrender values and withdrawals for life contracts					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	.0	.0	.0	.0	.0
14. All other benefits, except accident and health					.0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	.0	.0	.0	.0	.0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year									.0	.0
Settled during current year:										
18.1 By payment in full									.0	.0
18.2 By payment on compromised claims									.0	.0
18.3 Totals paid	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise									.0	.0
18.5 Amount rejected									.0	.0
18.6 Total settlements	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	.0	.0	.0	(a).0	.0	.0	.0	.0	.0	.0
21. Issued during year									.0	.0
22. Other changes to in force (Net)									.0	.0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	.0	.0	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Arizona

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	37,998				37,998
2. Annuity considerations	9,531				9,531
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	47,529	0	0	0	47,529
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	225				225
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	259				259
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	484	0	0	0	484
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	484	0	0	0	484
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	10,000				10,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	83,216				83,216
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	93,216	0	0	0	93,216
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	1,038	0	0	0	0	0	0	0	1,038
17. Incurred during current year	0	10,892							0	10,892
Settled during current year:										
18.1 By payment in full	0	10,000							0	10,000
18.2 By payment on compromised claims	0	10,000	0	0	0	0	0	0	0	0
18.3 Totals paid	0	10,000	0	0	0	0	0	0	0	10,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	10,000	0	0	0	0	0	0	0	10,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,930	0	0	0	0	0	0	0	1,930
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	177	2,148,058	0	0	0	0	0	0	177	2,148,058
21. Issued during year									0	0
22. Other changes to in force (Net)	(3)	(86,504)							(3)	(86,504)
23. In force December 31 of current year	174	2,061,554	0	0	0	0	0	0	174	2,061,554

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	9,731,567	9,815,686		6,605,562	6,687,966
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	516,095	516,095		249,156	253,285
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	516,095	516,095	0	249,156	253,285
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	10,247,662	10,331,781	0	6,854,718	6,941,251

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products31,678 and number of persons insured under
Indemnity only products22



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Arkansas

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	26,584				26,584
2. Annuity considerations	17,982				17,982
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	44,566	0	0	0	44,566
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	25,000				25,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	6,404				6,404
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	31,404	0	0	0	31,404
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	1,229	0	0	0	0	0	0	0	1,229
17. Incurred during current year	1	25,882							1	25,882
Settled during current year:										
18.1 By payment in full	1	25,000							1	25,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	25,000	0	0	0	0	0	0	1	25,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	25,000	0	0	0	0	0	0	1	25,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	2,111	0	0	0	0	0	0	0	2,111
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	93	3,650,081	0	0	0	0	0	0	93	3,650,081
21. Issued during year									0	0
22. Other changes to in force (Net)	(7)	(216,259)							(7)	(216,259)
23. In force December 31 of current year	86	3,433,822	0	0	0	0	0	0	86	3,433,822

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	250,865	253,033		170,281	172,405
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	82,471	82,471		39,814	40,474
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	82,471	82,471	0	39,814	40,474
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	333,336	335,504	0	210,095	212,879

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products411 and number of persons insured under
Indemnity only products610



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF California

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	273,286				273,286
2. Annuity considerations	89,799				89,799
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	363,084	0	0	0	363,084
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	250				250
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,295				1,295
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	1,545	0	0	0	1,545
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	1,545	0	0	0	1,545
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	82,415				82,415
10. Matured endowments	3,500				3,500
11. Annuity benefits	26,123				26,123
12. Surrender values and withdrawals for life contracts	353,757				353,757
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	56	0	0	0	56
14. All other benefits, except accident and health					0
15. Totals	465,851	0	0	0	465,851
DETAILS OF WRITE-INS					
1301. Coupons paid	56				56
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	56	0	0	0	56

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	2	21,215	0	0	0	0	0	0	2	21,215
17. Incurred during current year	3	78,264							3	78,264
Settled during current year:										
18.1 By payment in full	5	85,915							5	85,915
18.2 By payment on compromised claims									0	0
18.3 Totals paid	5	85,915	0	0	0	0	0	0	5	85,915
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	5	85,915	0	0	0	0	0	0	5	85,915
19. Unpaid Dec. 31, current year (16+17-18.6)	0	13,564	0	0	0	0	0	0	0	13,564
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	1,015	27,989,740	0	0	0	0	0	0	1,015	27,989,740
21. Issued during year									0	0
22. Other changes to in force (Net)	(24)	(743,195)							(24)	(743,195)
23. In force December 31 of current year	991	27,246,545	0	0	0	0	0	0	991	27,246,545

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	40,878,614	41,231,965		27,747,457	28,093,602
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	4,220	4,220		2,037	2,071
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	4,220	4,220	0	2,037	2,071
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	40,882,834	41,236,185	0	27,749,494	28,095,673

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products89,570 and number of persons insured under
Indemnity only products113



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Canada

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	416				416
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	416	0	0	0	416
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	2	0	0	0	0	0	0	0	2
17. Incurred during current year		9							0	9
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	11	0	0	0	0	0	0	0	11
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2	5,536	0	(a) 0	0	0	0	0	2	5,536
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	2	5,536	0	(a) 0	0	0	0	0	2	5,536

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Colorado

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	26,609				26,609
2. Annuity considerations	17,158				17,158
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	43,767	0	0	0	43,767
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	585				585
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	585	0	0	0	585
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	585	0	0	0	585
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	3,000				3,000
10. Matured endowments	2,000				2,000
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	16,439				16,439
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,178	0	0	0	1,178
14. All other benefits, except accident and health					0
15. Totals	22,617	0	0	0	22,617
DETAILS OF WRITE-INS					
1301. Coupons paid	1,178				1,178
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,178	0	0	0	1,178

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	766	0	0	0	0	0	0	0	766
17. Incurred during current year	1	5,648							1	5,648
Settled during current year:										
18.1 By payment in full	1	5,000							1	5,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	5,000	0	0	0	0	0	0	1	5,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	5,000	0	0	0	0	0	0	1	5,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,414	0	0	0	0	0	0	0	1,414
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	170	1,528,978	0	0	0	0	0	0	170	1,528,978
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(43,252)							(1)	(43,252)
23. In force December 31 of current year	169	1,485,726	0	0	0	0	0	0	169	1,485,726

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	14,166,121	14,288,571		9,615,635	9,735,588
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	979,433	979,433		472,843	480,678
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	979,433	979,433	0	472,843	480,678
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	15,145,554	15,268,004	0	10,088,478	10,216,266

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products35,393 and number of persons insured under
Indemnity only products509



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Connecticut

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	10,960				10,960
2. Annuity considerations	6,145				6,145
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	17,104	0	0	0	17,104
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	608				608
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	608	0	0	0	608
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	608	0	0	0	608
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	2,807				2,807
12. Surrender values and withdrawals for life contracts	30,222				30,222
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	33,030	0	0	0	33,030
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	458	0	0	0	0	0	0	0	458
17. Incurred during current year		242							0	242
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	700	0	0	0	0	0	0	0	700
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	51	3,767,347	0	0	0	0	0	0	51	3,767,347
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	51	3,767,347	0	0	0	0	0	0	51	3,767,347

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	757	757		366	372
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	757	757	0	366	372
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	757	757	0	366	372

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Delaware

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	12,679				12,679
2. Annuity considerations	6,477				6,477
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	19,156	0	0	0	19,156
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	22,795				22,795
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	4	0	0	0	4
14. All other benefits, except accident and health					0
15. Totals	22,799	0	0	0	22,799
DETAILS OF WRITE-INS					
1301. Coupons paid	4				4
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	4	0	0	0	4

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	430	0	0	0	0	0	0	0	430
17. Incurred during current year		394							0	394
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	824	0	0	0	0	0	0	0	824
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	63	1,783,260	0	0	0	0	0	0	63	1,783,260
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	63	1,783,260	0	0	0	0	0	0	63	1,783,260

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	9,961	10,047		6,761	6,846
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	9,961	10,047	0	6,761	6,846

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products10



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF District of Columbia

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	86,382				86,382
2. Annuity considerations	12,512				12,512
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	98,894	0	0	0	98,894
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	196,953				196,953
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	196,953	0	0	0	196,953
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	37,509	0	0	0	0	0	0	1	37,509
17. Incurred during current year	(1)	(32,132)							(1)	(32,132)
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	5,377	0	0	0	0	0	0	0	5,377
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	245	11,303,204	0	0	0	0	0	0	245	11,303,204
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	245	11,303,204	0	0	0	0	0	0	245	11,303,204

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	826,436	833,580		560,966	567,964
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	193	193		93	95
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	193	193	0	93	95
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	826,629	833,773	0	561,059	568,059

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products1,812 and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Florida

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	466,122				466,122
2. Annuity considerations	107,183				107,183
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	573,305	0	0	0	573,305
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	359				359
6.2 Applied to pay renewal premiums	368				368
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	2,275				2,275
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	3,001	0	0	0	3,001
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	3,001	0	0	0	3,001
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	257,432				257,432
10. Matured endowments	6,500				6,500
11. Annuity benefits	40,330				40,330
12. Surrender values and withdrawals for life contracts	1,757,991				1,757,991
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	271	0	0	0	271
14. All other benefits, except accident and health					0
15. Totals	2,062,523	0	0	0	2,062,523
DETAILS OF WRITE-INS					
1301. Coupons paid	271				271
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	271	0	0	0	271

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	18,454	0	0	0	0	0	0	1	18,454
17. Incurred during current year	15	303,152							15	303,152
Settled during current year:										
18.1 By payment in full	14	263,932							14	263,932
18.2 By payment on compromised claims									0	0
18.3 Totals paid	14	263,932	0	0	0	0	0	0	14	263,932
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	14	263,932	0	0	0	0	0	0	14	263,932
19. Unpaid Dec. 31, current year (16+17-18.6)	2	57,674	0	0	0	0	0	0	2	57,674
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1,201	47,711,937	0	0	0	0	0	0	1,201	47,711,937
21. Issued during year									0	0
22. Other changes to in force (Net)	(75)	(2,283,104)							(75)	(2,283,104)
23. In force December 31 of current year	1,126	45,428,833	0	0	0	0	0	0	1,126	45,428,833

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	14,054,337	14,175,821		9,539,758	9,658,765
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	3,330,869	3,330,869		1,608,051	1,634,696
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	3,330,869	3,330,869	0	1,608,051	1,634,696
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,385,206	17,506,690	0	11,147,809	11,293,461

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products68,120 and number of persons insured under Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Georgia

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	134,833				134,833
2. Annuity considerations	39,266				39,266
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	174,100	0	0	0	174,100
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	740				740
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	740	0	0	0	740
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	740	0	0	0	740
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	36,904				36,904
10. Matured endowments					0
11. Annuity benefits	823				823
12. Surrender values and withdrawals for life contracts	120,224				120,224
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	157,951	0	0	0	157,951
DETAILS OF WRITE-INS					
1301. Coupons paid					0
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	57,639	0	0	0	0	0	0	1	57,639
17. Incurred during current year	3	27,684							3	27,684
Settled during current year:										
18.1 By payment in full	2	36,904							2	36,904
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	36,904	0	0	0	0	0	0	2	36,904
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	36,904	0	0	0	0	0	0	2	36,904
19. Unpaid Dec. 31, current year (16+17-18.6)	2	48,420	0	0	0	0	0	0	2	48,420
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	417	13,743,850	0	0	0	0	0	0	417	13,743,850
21. Issued during year									0	0
22. Other changes to in force (Net)	(10)	(319,231)							(10)	(319,231)
23. In force December 31 of current year	407	13,424,619	0	0	0	0	0	0	407	13,424,619

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	12,034,805	12,138,832		8,168,947	8,270,853
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	736,032	736,032		355,336	361,224
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	736,032	736,032	0	355,336	361,224
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	12,770,837	12,874,864	0	8,524,283	8,632,077

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products35,817 and number of persons insured under
Indemnity only products2,611



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Guam

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					.0
2. Annuity considerations .....					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations .....					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					.0
6.2 Applied to pay renewal premiums .....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					.0
6.4 Other .....					.0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	.0
Annuities:					
7.1 Paid in cash or left on deposit .....					.0
7.2 Applied to provide paid-up annuities .....					.0
7.3 Other .....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	.0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					.0
10. Matured endowments .....					.0
11. Annuity benefits .....					.0
12. Surrender values and withdrawals for life contracts .....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	.0
14. All other benefits, except accident and health .....					.0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	.0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1	3,000	0	(a) 0	0	0	0	0	1	3,000
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	1	3,000	0	(a) 0	0	0	0	0	1	3,000

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Hawaii

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,698				2,698
2. Annuity considerations	65,669				65,669
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	68,366	0	0	0	68,366
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	303,368				303,368
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	303,368	0	0	0	303,368
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	77	0	0	0	0	0	0	0	77
17. Incurred during current year		51							0	51
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	128	0	0	0	0	0	0	0	128
POLICY EXHIBIT										
20. In force December 31, prior year	13	78,093	0	(a) 0	No. of Policies 0	0	0	0	13	78,093
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	13	78,093	0	(a) 0	0	0	0	0	13	78,093

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Idaho

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,661				2,661
2. Annuity considerations	1,210				1,210
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,871	0	0	0	3,871
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	110				110
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	110	0	0	0	110
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	51	0	0	0	0	0	0	0	51
17. Incurred during current year		33							0	33
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	84	0	0	0	0	0	0	0	84
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	22	116,182	0	0	0	0	0	0	22	116,182
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	22	116,182	0	0	0	0	0	0	22	116,182

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	452,122	456,030		306,890	310,719
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	79	79		38	39
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	79	79	0	38	39
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	452,201	456,109	0	306,928	310,758

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products1,098 and number of persons insured under
Indemnity only products443



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Illinois

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	266,209				266,209
2. Annuity considerations	159,603				159,603
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	425,812	0	0	0	425,812
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	704				704
6.2 Applied to pay renewal premiums	1,787				1,787
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	10,015				10,015
6.4 Other	338				338
6.5 Totals (Sum of 6.1 to 6.4)	12,845	0	0	0	12,845
Annuities:					
7.1 Paid in cash or left on deposit	9				9
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	9	0	0	0	9
8. Grand Totals (Lines 6.5 plus 7.4)	12,854	0	0	0	12,854
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	169,036				169,036
10. Matured endowments	26,155				26,155
11. Annuity benefits	2,595				2,595
12. Surrender values and withdrawals for life contracts	419,645				419,645
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	197	0	0	0	197
14. All other benefits, except accident and health					0
15. Totals	617,628	0	0	0	617,628
DETAILS OF WRITE-INS					
1301. Coupons paid	197				197
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	197	0	0	0	197

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	(1)	10,228	0	0	0	0	0	0	(1)	10,228
17. Incurred during current year	21	240,196							21	240,196
Settled during current year:										
18.1 By payment in full	19	195,191							19	195,191
18.2 By payment on compromised claims									0	0
18.3 Totals paid	19	195,191	0	0	0	0	0	0	19	195,191
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	19	195,191	0	0	0	0	0	0	19	195,191
19. Unpaid Dec. 31, current year (16+17-18.6)	2	55,232	0	0	0	0	0	0	2	55,232
POLICY EXHIBIT					No. of Policies					
				(a)						
	1,794	37,376,583	0	0	0	0	0	0	1,794	37,376,583
									0	0
21. Issued during year										
22. Other changes to in force (Net)	(55)	(1,688,474)							(55)	(1,688,474)
23. In force December 31 of current year	1,739	35,688,109	0	0	0	0	0	0	1,739	35,688,109

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	28,552,321	28,799,124		19,380,654	19,622,425
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	1,456,832	1,456,832		703,318	714,972
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,456,832	1,456,832	0	703,318	714,972
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	30,009,153	30,255,956	0	20,083,972	20,337,397

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products78,995 and number of persons insured under
Indemnity only products48



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Indiana

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	260,373				260,373
2. Annuity considerations	35,831				35,831
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	296,203	0	0	0	296,203
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	1,116				1,116
6.2 Applied to pay renewal premiums	641				641
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	12,897				12,897
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	14,654	0	0	0	14,654
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	14,654	0	0	0	14,654
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	797,499				797,499
10. Matured endowments	8,361				8,361
11. Annuity benefits	7,732				7,732
12. Surrender values and withdrawals for life contracts	360,460				360,460
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	739	0	0	0	739
14. All other benefits, except accident and health					0
15. Totals	1,174,791	0	0	0	1,174,791
DETAILS OF WRITE-INS					
1301. Coupons paid	739				739
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	739	0	0	0	739

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	2	14,464	0	0	0	0	0	0	2	14,464
17. Incurred during current year	38	811,273							38	811,273
Settled during current year:										
18.1 By payment in full	39	805,860							39	805,860
18.2 By payment on compromised claims									0	0
18.3 Totals paid	39	805,860	0	0	0	0	0	0	39	805,860
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	39	805,860	0	0	0	0	0	0	39	805,860
19. Unpaid Dec. 31, current year (16+17-18.6)	1	19,876	0	0	0	0	0	0	1	19,876
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	1,337	41,357,407	0	0	0	0	0	0	1,337	41,357,407
21. Issued during year									0	0
22. Other changes to in force (Net)	(229)	(6,970,977)							(229)	(6,970,977)
23. In force December 31 of current year	1,108	34,386,430	0	0	0	0	0	0	1,108	34,386,430

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	7,106,917	7,168,348		4,824,011	4,884,189
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	1,593	1,592		769	782
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,593	1,592	0	769	782
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,108,510	7,169,940	0	4,824,780	4,884,971

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products25,916 and number of persons insured under
Indemnity only products10



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Iowa

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	21,188				21,188
2. Annuity considerations	11,010				11,010
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	32,197	0	0	0	32,197
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,744				1,744
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	1,744	0	0	0	1,744
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	1,744	0	0	0	1,744
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	19,729				19,729
12. Surrender values and withdrawals for life contracts	131,295				131,295
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	113	0	0	0	113
14. All other benefits, except accident and health					0
15. Totals	151,138	0	0	0	151,138
DETAILS OF WRITE-INS					
1301. Coupons paid	113				113
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	113	0	0	0	113

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	1,457	0	0	0	0	0	0	1	1,457
17. Incurred during current year	(1)	254							(1)	254
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,711	0	0	0	0	0	0	0	1,711
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	137	2,501,371	0	0	0	0	0	0	137	2,501,371
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	137	2,501,371	0	0	0	0	0	0	137	2,501,371

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	112,111	113,080		76,098	77,048
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	18,411	18,411		8,888	9,036
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	18,411	18,411	0	8,888	9,036
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	130,522	131,491	0	84,986	86,084

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products76 and number of persons insured under
Indemnity only products310



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Kansas

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	4,944				4,944
2. Annuity considerations	13,358				13,358
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	18,302	0	0	0	18,302
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,500				2,500
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	20,123				20,123
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	3	0	0	0	3
14. All other benefits, except accident and health					0
15. Totals	22,626	0	0	0	22,626
DETAILS OF WRITE-INS					
1301. Coupons paid	3				3
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	3	0	0	0	3

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	100	0	0	0	0	0	0	0	100
17. Incurred during current year	0	2,561							0	2,561
Settled during current year:										
18.1 By payment in full	0	2,500							0	2,500
18.2 By payment on compromised claims	0	2,500	0	0	0	0	0	0	0	0
18.3 Totals paid	0	2,500	0	0	0	0	0	0	0	2,500
18.4 Reduction by compromise									0	0
18.5 Amount rejected	0	2,500	0	0	0	0	0	0	0	0
18.6 Total settlements	0	2,500	0	0	0	0	0	0	0	2,500
19. Unpaid Dec. 31, current year (16+17-18.6)	0	161	0	0	0	0	0	0	0	161
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	40	374,138	0	0	0	0	0	0	40	374,138
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(21,626)							(1)	(21,626)
23. In force December 31 of current year	39	352,512	0	0	0	0	0	0	39	352,512

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	2,906,653	2,931,778		1,972,969	1,997,581
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	380,505	380,505		183,697	186,741
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	380,505	380,505	0	183,697	186,741
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,287,158	3,312,283	0	2,156,666	2,184,322

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products12,247 and number of persons insured under
Indemnity only products2



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Kentucky

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	55,881				55,881
2. Annuity considerations	23,972				23,972
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	79,853	0	0	0	79,853
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	152				152
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	152	0	0	0	152
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	152	0	0	0	152
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	123,770				123,770
10. Matured endowments	1,000				1,000
11. Annuity benefits	12,645				12,645
12. Surrender values and withdrawals for life contracts	25,615				25,615
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	163,030	0	0	0	163,030
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	1,669	0	0	0	0	0	0	0	1,669
17. Incurred during current year	7	140,783							7	140,783
Settled during current year:										
18.1 By payment in full ...	6	124,770							6	124,770
18.2 By payment on compromised claims									0	0
18.3 Totals paid	6	124,770	0	0	0	0	0	0	6	124,770
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	6	124,770	0	0	0	0	0	0	6	124,770
19. Unpaid Dec. 31, current year (16+17-18.6)	1	17,682	0	0	0	0	0	0	1	17,682
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	326	6,456,650	0	0	0	0	0	0	326	6,456,650
21. Issued during year									0	0
22. Other changes to in force (Net)	(35)	(1,079,301)							(35)	(1,079,301)
23. In force December 31 of current year	291	5,377,349	0	0	0	0	0	0	291	5,377,349

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	4,325	4,325		2,088	2,123
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	4,325	4,325	0	2,088	2,123
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,325	4,325	0	2,088	2,123

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Louisiana

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	30,376				30,376
2. Annuity considerations	5,017				5,017
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	35,393	0	0	0	35,393
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,033				1,033
10. Matured endowments					0
11. Annuity benefits	4,130				4,130
12. Surrender values and withdrawals for life contracts	10,042				10,042
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	15,205	0	0	0	15,205
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	905	0	0	0	0	0	0	0	905
17. Incurred during current year	0	1,871							0	1,871
Settled during current year:										
18.1 By payment in full	0	1,033							0	1,033
18.2 By payment on compromised claims	0	1,033	0	0	0	0	0	0	0	0
18.3 Totals paid	0	1,033	0	0	0	0	0	0	0	1,033
18.4 Reduction by compromise									0	0
18.5 Amount rejected	0	1,033	0	0	0	0	0	0	0	0
18.6 Total settlements	0	1,033	0	0	0	0	0	0	0	1,033
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,743	0	0	0	0	0	0	0	1,743
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	109	2,903,401	0	0	0	0	0	0	109	2,903,401
21. Issued during year									0	0
22. Other changes to in force (Net)		(8,937)							0	(8,937)
23. In force December 31 of current year	109	2,894,464	0	0	0	0	0	0	109	2,894,464

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	6,383,045	6,438,219		4,332,663	4,386,712
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	759,196	759,196		366,519	372,592
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	759,196	759,196	0	366,519	372,592
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,142,241	7,197,415	0	4,699,182	4,759,304

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products28,055 and number of persons insured under
Indemnity only products778



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Maine

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,885				2,885
2. Annuity considerations	2,250				2,250
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	5,135	0	0	0	5,135
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	2,279				2,279
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	2,279	0	0	0	2,279
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	190	0	0	0	0	0	0	0	190
17. Incurred during current year		133							0	133
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	323	0	0	0	0	0	0	0	323
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	18	359,794	0	0	0	0	0	0	18	359,794
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	18	359,794	0	0	0	0	0	0	18	359,794

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	405	405		196	199
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	405	405	0	196	199
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	405	405	0	196	199

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Maryland

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	834,184				834,184
2. Annuity considerations	462,916				462,916
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,297,099	0	0	0	1,297,099
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	474				474
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	342				342
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	816	0	0	0	816
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	816	0	0	0	816
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	565,876				565,876
10. Matured endowments					0
11. Annuity benefits	450				450
12. Surrender values and withdrawals for life contracts	1,067,741				1,067,741
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	1,634,067	0	0	0	1,634,067
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	6	158,657	0	0	0	0	0	0	6	158,657
17. Incurred during current year	21	492,452							21	492,452
Settled during current year:										
18.1 By payment in full	25	565,876							25	565,876
18.2 By payment on compromised claims									0	0
18.3 Totals paid	25	565,876	0	0	0	0	0	0	25	565,876
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	25	565,876	0	0	0	0	0	0	25	565,876
19. Unpaid Dec. 31, current year (16+17-18.6)	2	85,232	0	0	0	0	0	0	2	85,232
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	4,090	103,731,154	0	0	0	0	0	0	4,090	103,731,154
21. Issued during year									0	0
22. Other changes to in force (Net)	(161)	(4,895,031)							(161)	(4,895,031)
23. In force December 31 of current year	3,929	98,836,123	0	0	0	0	0	0	3,929	98,836,123

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	3,152,296	3,179,544		2,139,706	2,166,398
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	947	947		457	465
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	947	947	0	457	465
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,153,243	3,180,491	0	2,140,163	2,166,863

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products10,136 and number of persons insured under
Indemnity only products23



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Massachusetts

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	227,909				227,909
2. Annuity considerations	63,604				63,604
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	291,512	0	0	0	291,512
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	121				121
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	121	0	0	0	121
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	121	0	0	0	121
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	80,000				80,000
10. Matured endowments					0
11. Annuity benefits	14,184				14,184
12. Surrender values and withdrawals for life contracts	275,814				275,814
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	369,997	0	0	0	369,997
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	32,464	0	0	0	0	0	0	1	32,464
17. Incurred during current year	4	65,650							4	65,650
Settled during current year:										
18.1 By payment in full	4	80,000							4	80,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	4	80,000	0	0	0	0	0	0	4	80,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	4	80,000	0	0	0	0	0	0	4	80,000
19. Unpaid Dec. 31, current year (16+17-18.6)	1	18,113	0	0	0	0	0	0	1	18,113
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	712	23,816,905	0	0	0	0	0	0	712	23,816,905
21. Issued during year									0	0
22. Other changes to in force (Net)	(23)	(692,028)							(23)	(692,028)
23. In force December 31 of current year	689	23,124,877	0	0	0	0	0	0	689	23,124,877

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	193,992	195,669		131,678	133,320
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	1,221	1,221		589	599
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,221	1,221	0	589	599
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	195,213	196,890	0	132,267	133,919

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products109 and number of persons insured under
Indemnity only products306



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Michigan

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	436,571				436,571
2. Annuity considerations	121,359				121,359
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	557,930	0	0	0	557,930
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	3,441				3,441
6.2 Applied to pay renewal premiums	549				549
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	15,030				15,030
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	19,019	0	0	0	19,019
Annuities:					
7.1 Paid in cash or left on deposit	2,011				2,011
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	2,011	0	0	0	2,011
8. Grand Totals (Lines 6.5 plus 7.4)	21,030	0	0	0	21,030
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	468,815				468,815
10. Matured endowments	25,972				25,972
11. Annuity benefits	73,996				73,996
12. Surrender values and withdrawals for life contracts	867,438				867,438
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	117	0	0	0	117
14. All other benefits, except accident and health					0
15. Totals	1,436,339	0	0	0	1,436,339
DETAILS OF WRITE-INS					
1301. Coupons paid	117				117
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	117	0	0	0	117

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	5	31,653	0	0	0	0	0	0	5	31,653
17. Incurred during current year	28	510,728							28	510,728
Settled during current year:										
18.1 By payment in full	32	494,787							32	494,787
18.2 By payment on compromised claims									0	0
18.3 Totals paid	32	494,787	0	0	0	0	0	0	32	494,787
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	32	494,787	0	0	0	0	0	0	32	494,787
19. Unpaid Dec. 31, current year (16+17-18.6)	1	47,594	0	0	0	0	0	0	1	47,594
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2,845	51,557,492	0	0	0	0	0	0	2,845	51,557,492
21. Issued during year									0	0
22. Other changes to in force (Net)	(141)	(4,280,086)							(141)	(4,280,086)
23. In force December 31 of current year	2,704	47,277,406	0	0	0	0	0	0	2,704	47,277,406

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	13,253,944	13,368,509		8,996,470	9,108,700
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	424,048	424,048		204,719	208,111
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	424,048	424,048	0	204,719	208,111
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	13,677,992	13,792,557	0	9,201,189	9,316,811

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products40,135 and number of persons insured under
Indemnity only products189



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Minnesota

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	124,087				124,087
2. Annuity considerations	5,819				5,819
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	129,906	0	0	0	129,906
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	1,953				1,953
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	4,606				4,606
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	6,559	0	0	0	6,559
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	6,559	0	0	0	6,559
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	135,943				135,943
10. Matured endowments	12,667				12,667
11. Annuity benefits	10,910				10,910
12. Surrender values and withdrawals for life contracts	172,882				172,882
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,009	0	0	0	1,009
14. All other benefits, except accident and health					0
15. Totals	333,412	0	0	0	333,412
DETAILS OF WRITE-INS					
1301. Coupons paid	1,009				1,009
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,009	0	0	0	1,009

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	29,664	0	0	0	0	0	0	1	29,664
17. Incurred during current year	11	125,568							11	125,568
Settled during current year:										
18.1 By payment in full	12	148,611							12	148,611
18.2 By payment on compromised claims									0	0
18.3 Totals paid	12	148,611	0	0	0	0	0	0	12	148,611
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	12	148,611	0	0	0	0	0	0	12	148,611
19. Unpaid Dec. 31, current year (16+17-18.6)	0	6,621	0	0	0	0	0	0	0	6,621
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	741	12,788,415	0	0	0	0	0	0	741	12,788,415
21. Issued during year									0	0
22. Other changes to in force (Net)	(42)	(1,285,535)							(42)	(1,285,535)
23. In force December 31 of current year	699	11,502,880	0	0	0	0	0	0	699	11,502,880

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	3,089,698	3,116,405		2,097,215	2,123,378
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	747	747		361	367
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	747	747	0	361	367
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,090,445	3,117,152	0	2,097,576	2,123,745

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products9,926 and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Mississippi

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	26,252				26,252
2. Annuity considerations	4,661				4,661
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	30,913	0	0	0	30,913
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	100,000				100,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	92,997				92,997
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	192,997	0	0	0	192,997
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	826	0	0	0	0	0	0	0	826
17. Incurred during current year	4	100,413							4	100,413
Settled during current year:										
18.1 By payment in full	4	100,000							4	100,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	4	100,000	0	0	0	0	0	0	4	100,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	4	100,000	0	0	0	0	0	0	4	100,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,239	0	0	0	0	0	0	0	1,239
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	60	1,664,106	0	0	0	0	0	0	60	1,664,106
21. Issued during year									0	0
22. Other changes to in force (Net)	(28)	(865,035)							(28)	(865,035)
23. In force December 31 of current year	32	799,071	0	0	0	0	0	0	32	799,071

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,003,897	2,021,219		1,360,199	1,377,167
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	354,368	354,368		171,079	173,914
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	354,368	354,368	0	171,079	173,914
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,358,265	2,375,587	0	1,531,278	1,551,081

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products8,446 and number of persons insured under
Indemnity only products74



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Missouri

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	27,679				27,679
2. Annuity considerations	33,548				33,548
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	61,227	0	0	0	61,227
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,533				1,533
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	1,533	0	0	0	1,533
Annuities:					
7.1 Paid in cash or left on deposit	1				1
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	1	0	0	0	1
8. Grand Totals (Lines 6.5 plus 7.4)	1,534	0	0	0	1,534
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	2,234				2,234
10. Matured endowments					0
11. Annuity benefits	929				929
12. Surrender values and withdrawals for life contracts	74,032				74,032
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	5	0	0	0	5
14. All other benefits, except accident and health					0
15. Totals	77,200	0	0	0	77,200
DETAILS OF WRITE-INS					
1301. Coupons paid	5				5
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	5	0	0	0	5

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	777	0	0	0	0	0	0	0	777
17. Incurred during current year	0	2,933							0	2,933
Settled during current year:										
18.1 By payment in full	0	2,234							0	2,234
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	2,234	0	0	0	0	0	0	0	2,234
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	2,234	0	0	0	0	0	0	0	2,234
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,476	0	0	0	0	0	0	0	1,476
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	135	2,345,712	0	0	0	0	0	0	135	2,345,712
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(19,323)							(1)	(19,323)
23. In force December 31 of current year	134	2,326,389	0	0	0	0	0	0	134	2,326,389

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	6,788,616	6,847,296		4,607,956	4,665,439
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	248,314	248,314		119,879	121,865
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	248,314	248,314	0	119,879	121,865
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,036,930	7,095,610	0	4,727,835	4,787,304

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products26,876 and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Montana

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,805				4,805
2. Annuity considerations	880				880
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	5,686	0	0	0	5,686
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	9,671				9,671
10. Matured endowments	2,500				2,500
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	289				289
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	12,461	0	0	0	12,461
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	172	0	0	0	0	0	0	0	172
17. Incurred during current year	2	12,330							2	12,330
Settled during current year:										
18.1 By payment in full	2	12,171							2	12,171
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	12,171	0	0	0	0	0	0	2	12,171
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	12,171	0	0	0	0	0	0	2	12,171
19. Unpaid Dec. 31, current year (16+17-18.6)	0	331	0	0	0	0	0	0	0	331
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	26	209,537	0	0	0	0	0	0	26	209,537
21. Issued during year									0	0
22. Other changes to in force (Net)	(3)	(105,287)							(3)	(105,287)
23. In force December 31 of current year	23	104,250	0	0	0	0	0	0	23	104,250

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	51	51		25	25
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	51	51	0	25	25
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	51	51	0	25	25

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Nebraska

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	16,907				16,907
2. Annuity considerations	5,656				5,656
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	22,563	0	0	0	22,563
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	373				373
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	373	0	0	0	373
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	373	0	0	0	373
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	633				633
12. Surrender values and withdrawals for life contracts	23,599				23,599
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	6	0	0	0	6
14. All other benefits, except accident and health					0
15. Totals	24,238	0	0	0	24,238
DETAILS OF WRITE-INS					
1301. Coupons paid	6				6
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	6	0	0	0	6

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	484	0	0	0	0	0	0	0	484
17. Incurred during current year		420							0	420
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	904	0	0	0	0	0	0	0	904
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	83	1,436,011	0	0	0	0	0	0	83	1,436,011
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	83	1,436,011	0	0	0	0	0	0	83	1,436,011

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	324,678	327,484		220,384	223,133
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	33,809	33,809		16,322	16,593
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	33,809	33,809	0	16,322	16,593
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	358,487	361,293	0	236,706	239,726

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products931 and number of persons insured under
Indemnity only products219



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Nevada

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	17,101				17,101
2. Annuity considerations	2,011				2,011
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	19,112	0	0	0	19,112
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	45				45
6.2 Applied to pay renewal premiums	46				46
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	528				528
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	619	0	0	0	619
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	619	0	0	0	619
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,000				1,000
10. Matured endowments	1,500				1,500
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	2,391				2,391
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	367	0	0	0	367
14. All other benefits, except accident and health					0
15. Totals	5,259	0	0	0	5,259
DETAILS OF WRITE-INS					
1301. Coupons paid	367				367
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	367	0	0	0	367

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	1,003	0	0	0	0	0	0	0	1,003
17. Incurred during current year	1	2,577							1	2,577
Settled during current year:										
18.1 By payment in full	1	2,500							1	2,500
18.2 By payment on compromised claims									0	0
18.3 Totals paid	1	2,500	0	0	0	0	0	0	1	2,500
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	1	2,500	0	0	0	0	0	0	1	2,500
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,080	0	0	0	0	0	0	0	1,080
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	59	2,182,008	0	0	0	0	0	0	59	2,182,008
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(21,626)							(1)	(21,626)
23. In force December 31 of current year	58	2,160,382	0	0	0	0	0	0	58	2,160,382

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	5,313,827	5,359,760		3,606,903	3,651,899
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	135,070	135,070		65,208	66,288
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	135,070	135,070	0	65,208	66,288
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,448,897	5,494,830	0	3,672,111	3,718,187

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products10,715 and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF New Hampshire

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	28,305				28,305
2. Annuity considerations	8,544				8,544
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	36,849	0	0	0	36,849
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	40				40
6.2 Applied to pay renewal premiums	109				109
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	149	0	0	0	149
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	149	0	0	0	149
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	52,785				52,785
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	52,785	0	0	0	52,785
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	912	0	0	0	0	0	0	0	912
17. Incurred during current year		655							0	655
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,567	0	0	0	0	0	0	0	1,567
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	91	3,600,887	0	0	0	0	0	0	91	3,600,887
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	91	3,600,887	0	0	0	0	0	0	91	3,600,887

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	22	22		11	11
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	22	22	0	11	11
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	22	22	0	11	11

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF New Jersey

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	394,813				394,813
2. Annuity considerations	155,402				155,402
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	550,214	0	0	0	550,214
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	775				775
6.2 Applied to pay renewal premiums	1,288				1,288
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	3,469				3,469
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	5,531	0	0	0	5,531
Annuities:					
7.1 Paid in cash or left on deposit	1,309				1,309
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	1,309	0	0	0	1,309
8. Grand Totals (Lines 6.5 plus 7.4)	6,840	0	0	0	6,840
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	467,214				467,214
10. Matured endowments					0
11. Annuity benefits	27,110				27,110
12. Surrender values and withdrawals for life contracts	1,074,827				1,074,827
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	5,873	0	0	0	5,873
14. All other benefits, except accident and health					0
15. Totals	1,575,024	0	0	0	1,575,024
DETAILS OF WRITE-INS					
1301. Coupons paid	5,873				5,873
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	5,873	0	0	0	5,873

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	20,454	0	0	0	0	0	0	1	20,454
17. Incurred during current year	20	473,118							20	473,118
Settled during current year:										
18.1 By payment in full	21	467,214							21	467,214
18.2 By payment on compromised claims									0	0
18.3 Totals paid	21	467,214	0	0	0	0	0	0	21	467,214
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	21	467,214	0	0	0	0	0	0	21	467,214
19. Unpaid Dec. 31, current year (16+17-18.6)	0	26,358	0	0	0	0	0	0	0	26,358
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	1,364	55,573,082	0	0	0	0	0	0	1,364	55,573,082
21. Issued during year									0	0
22. Other changes to in force (Net)	(133)	(4,041,566)							(133)	(4,041,566)
23. In force December 31 of current year	1,231	51,531,516	0	0	0	0	0	0	1,231	51,531,516

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	1,958	1,958		945	961
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,958	1,958	0	945	961
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,958	1,958	0	945	961

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF New Mexico

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	4,504				4,504
2. Annuity considerations	1,014				1,014
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	5,517	0	0	0	5,517
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	2,510				2,510
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	14	0	0	0	14
14. All other benefits, except accident and health					0
15. Totals	2,524	0	0	0	2,524
DETAILS OF WRITE-INS					
1301. Coupons paid	14				14
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	14	0	0	0	14

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	170	0	0	0	0	0	0	0	170
17. Incurred during current year		108							0	108
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	278	0	0	0	0	0	0	0	278
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	(4)	(956,025)	0	0	0	0	0	0	(4)	(956,025)
21. Issued during year									0	0
22. Other changes to in force (Net)	4	956,025							4	956,025
23. In force December 31 of current year	0	0	0	0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	856,304	863,705		581,239	588,490
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	1,893	1,893		914	929
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,893	1,893	0	914	929
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	858,197	865,598	0	582,153	589,419

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products1,921 and number of persons insured under
Indemnity only products485



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF New York

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	25,612				25,612
2. Annuity considerations	9,454				9,454
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	35,066	0	0	0	35,066
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	329				329
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	329	0	0	0	329
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	329	0	0	0	329
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	7,031				7,031
10. Matured endowments					0
11. Annuity benefits	1,041				1,041
12. Surrender values and withdrawals for life contracts	69,841				69,841
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	5	0	0	0	5
14. All other benefits, except accident and health					0
15. Totals	77,917	0	0	0	77,917
DETAILS OF WRITE-INS					
1301. Coupons paid	5				5
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	5	0	0	0	5

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	650	0	0	0	0	0	0	0	650
17. Incurred during current year	0	8,115							0	8,115
Settled during current year:										
18.1 By payment in full	0	7,031							0	7,031
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	7,031	0	0	0	0	0	0	0	7,031
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	7,031	0	0	0	0	0	0	0	7,031
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,734	0	0	0	0	0	0	0	1,734
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	128	3,438,615	0	0	0	0	0	0	128	3,438,615
21. Issued during year									0	0
22. Other changes to in force (Net)	(2)	(60,821)							(2)	(60,821)
23. In force December 31 of current year	126	3,377,794	0	0	0	0	0	0	126	3,377,794

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	1,828	1,828		883	897
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,828	1,828	0	883	897
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,828	1,828	0	883	897

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF North Carolina

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	189,929				189,929
2. Annuity considerations	32,944				32,944
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	222,873	0	0	0	222,873
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	1,418				1,418
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	1,418	0	0	0	1,418
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	1,418	0	0	0	1,418
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	51,524				51,524
10. Matured endowments					0
11. Annuity benefits	11,727				11,727
12. Surrender values and withdrawals for life contracts	208,702				208,702
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	40	0	0	0	40
14. All other benefits, except accident and health					0
15. Totals	271,993	0	0	0	271,993
DETAILS OF WRITE-INS					
1301. Coupons paid	40				40
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	40	0	0	0	40

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	5,910	0	0	0	0	0	0	0	5,910
17. Incurred during current year	2	55,989							2	55,989
Settled during current year:										
18.1 By payment in full	2	51,524							2	51,524
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	51,524	0	0	0	0	0	0	2	51,524
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	51,524	0	0	0	0	0	0	2	51,524
19. Unpaid Dec. 31, current year (16+17-18.6)	0	10,375	0	0	0	0	0	0	0	10,375
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	367	13,616,210	0	0	0	0	0	0	367	13,616,210
21. Issued during year									0	0
22. Other changes to in force (Net)	(15)	(445,702)							(15)	(445,702)
23. In force December 31 of current year	352	13,170,508	0	0	0	0	0	0	352	13,170,508

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	3,710,236	3,742,307		2,518,422	2,549,839
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	317,148	317,148		153,110	155,647
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	317,148	317,148	0	153,110	155,647
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	4,027,384	4,059,455	0	2,671,532	2,705,486

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products4,281 and number of persons insured under
Indemnity only products6,653



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF North Dakota

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	439				439
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	439	0	0	0	439
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	52	0	0	0	0	0	0	0	52
17. Incurred during current year		155							0	155
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	208	0	0	0	0	0	0	0	208
POLICY EXHIBIT										
20. In force December 31, prior year	10	128,000	0	(a)0	No. of Policies0	0	0	0	10	128,000
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	10	128,000	0	(a)0	0	0	0	0	10	128,000

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	958,688	966,975		650,735	658,853
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	958,688	966,975	0	650,735	658,853

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products44 and number of persons insured under
Indemnity only products1,604



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Northern Mariana Island

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance .....					.0
2. Annuity considerations .....					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations .....					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit .....					.0
6.2 Applied to pay renewal premiums .....					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period .....					.0
6.4 Other .....					.0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	.0
Annuities:					
7.1 Paid in cash or left on deposit .....					.0
7.2 Applied to provide paid-up annuities .....					.0
7.3 Other .....					.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	.0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits .....					.0
10. Matured endowments .....					.0
11. Annuity benefits .....					.0
12. Surrender values and withdrawals for life contracts .....					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	.0
14. All other benefits, except accident and health .....					.0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	.0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year									0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Ohio

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	970,708				970,708
2. Annuity considerations	305,457				305,457
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,276,166	0	0	0	1,276,166
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	411				411
6.2 Applied to pay renewal premiums	98				98
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	4,569				4,569
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	5,077	0	0	0	5,077
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	5,077	0	0	0	5,077
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	346,835				346,835
10. Matured endowments					0
11. Annuity benefits	43,499				43,499
12. Surrender values and withdrawals for life contracts	2,295,103				2,295,103
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,812	0	0	0	1,812
14. All other benefits, except accident and health					0
15. Totals	2,687,249	0	0	0	2,687,249
DETAILS OF WRITE-INS					
1301. Coupons paid	1,812				1,812
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,812	0	0	0	1,812

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	152,137	0	0	0	0	0	0	1	152,137
17. Incurred during current year	14	258,880							14	258,880
Settled during current year:										
18.1 By payment in full	15	346,835							15	346,835
18.2 By payment on compromised claims									0	0
18.3 Totals paid	15	346,835	0	0	0	0	0	0	15	346,835
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	15	346,835	0	0	0	0	0	0	15	346,835
19. Unpaid Dec. 31, current year (16+17-18.6)	(1)	64,182	0	0	0	0	0	0	(1)	64,182
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	2,527	118,367,453	0	0	0	0	0	0	2,527	118,367,453
21. Issued during year									0	0
22. Other changes to in force (Net)	(99)	(3,000,247)							(99)	(3,000,247)
23. In force December 31 of current year	2,428	115,367,206	0	0	0	0	0	0	2,428	115,367,206

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	16,321,738	16,462,821		11,078,818	11,217,024
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	300,473	300,473		145,060	147,464
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	300,473	300,473	0	145,060	147,464
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	16,622,211	16,763,294	0	11,223,878	11,364,488

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products57,596 and number of persons insured under
Indemnity only products25



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Oklahoma

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	4,345				4,345
2. Annuity considerations	2,093				2,093
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	6,438	0	0	0	6,438
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	790				790
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	790	0	0	0	790
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	790	0	0	0	790
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	50,000				50,000
10. Matured endowments					0
11. Annuity benefits	2,531				2,531
12. Surrender values and withdrawals for life contracts	2,960				2,960
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	55,491	0	0	0	55,491
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	144	0	0	0	0	0	0	0	144
17. Incurred during current year	2	50,159							2	50,159
Settled during current year:										
18.1 By payment in full	2	50,000							2	50,000
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	50,000	0	0	0	0	0	0	2	50,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	50,000	0	0	0	0	0	0	2	50,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	303	0	0	0	0	0	0	0	303
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	21	190,430	0	0	0	0	0	0	21	190,430
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	21	190,430	0	0	0	0	0	0	21	190,430

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)	2,219,025	2,238,206		1,506,223	1,525,013
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	50,649	50,649		24,452	24,857
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	50,649	50,649	0	24,452	24,857
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,269,674	2,288,855	0	1,530,675	1,549,870

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products10,078 and number of persons insured under
Indemnity only products208



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Oregon

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	8,554				8,554
2. Annuity considerations	517				517
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	9,071	0	0	0	9,071
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	5,000				5,000
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	866				866
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	122	0	0	0	122
14. All other benefits, except accident and health					0
15. Totals	5,988	0	0	0	5,988
DETAILS OF WRITE-INS					
1301. Coupons paid	122				122
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	122	0	0	0	122

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	319	0	0	0	0	0	0	0	319
17. Incurred during current year	0	5,266							0	5,266
Settled during current year:										
18.1 By payment in full	0	5,000							0	5,000
18.2 By payment on compromised claims	0	5,000	0	0	0	0	0	0	0	0
18.3 Totals paid	0	5,000	0	0	0	0	0	0	0	5,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	5,000	0	0	0	0	0	0	0	5,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	586	0	0	0	0	0	0	0	586
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	37	653,714	0	0	0	0	0	0	37	653,714
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(43,252)							(1)	(43,252)
23. In force December 31 of current year	36	610,462	0	0	0	0	0	0	36	610,462

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	861	861		416	422
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	861	861	0	416	422
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	861	861	0	416	422

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Pennsylvania

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	370,863				370,863
2. Annuity considerations	241,561				241,561
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	612,424	0	0	0	612,424
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	266				266
6.2 Applied to pay renewal premiums	1,593				1,593
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	632				632
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	2,491	0	0	0	2,491
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	2,491	0	0	0	2,491
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	126,010				126,010
10. Matured endowments					0
11. Annuity benefits	42,152				42,152
12. Surrender values and withdrawals for life contracts	633,138				633,138
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	2,035	0	0	0	2,035
14. All other benefits, except accident and health					0
15. Totals	803,335	0	0	0	803,335
DETAILS OF WRITE-INS					
1301. Coupons paid	2,035				2,035
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	2,035	0	0	0	2,035

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	1	94,016	0	0	0	0	0	0	1	94,016
17. Incurred during current year	5	57,104							5	57,104
Settled during current year:										
18.1 By payment in full	6	126,010							6	126,010
18.2 By payment on compromised claims									0	0
18.3 Totals paid	6	126,010	0	0	0	0	0	0	6	126,010
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	6	126,010	0	0	0	0	0	0	6	126,010
19. Unpaid Dec. 31, current year (16+17-18.6)	0	25,110	0	0	0	0	0	0	0	25,110
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	1,257	49,548,043	0	0	0	0	0	0	1,257	49,548,043
21. Issued during year									0	0
22. Other changes to in force (Net)	(36)	(1,090,031)							(36)	(1,090,031)
23. In force December 31 of current year	1,221	48,458,012	0	0	0	0	0	0	1,221	48,458,012

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	2,190,092	2,209,023		1,486,584	1,505,129
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	2,044	2,044		987	1,003
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	2,044	2,044	0	987	1,003
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	2,192,136	2,211,067	0	1,487,571	1,506,132

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products7,205 and number of persons insured under
Indemnity only products87



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Puerto Rico

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance	184				184
2. Annuity considerations					0
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	184	0	0	0	184
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	187				187
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	187	0	0	0	187
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	0	0	0	0	0	0	0	0	0
17. Incurred during current year		0							0	0
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	0	0	0	(a) 0	0	0	0	0	0	0
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	0	0	0	(a) 0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Rhode Island

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	7,686				7,686
2. Annuity considerations	2,990				2,990
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	10,676	0	0	0	10,676
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits	3,991				3,991
12. Surrender values and withdrawals for life contracts	13,061				13,061
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	17,052	0	0	0	17,052
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	150	0	0	0	0	0	0	0	150
17. Incurred during current year		110							0	110
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	260	0	0	0	0	0	0	0	260
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	27	459,173	0	0	0	0	0	0	27	459,173
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	27	459,173	0	0	0	0	0	0	27	459,173

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....					
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF South Carolina

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	49,793				49,793
2. Annuity considerations	19,376				19,376
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	69,169	0	0	0	69,169
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	143				143
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	147				147
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	289	0	0	0	289
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	289	0	0	0	289
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	235,736				235,736
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	306,811				306,811
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	542,548	0	0	0	542,548
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	1,488	0	0	0	0	0	0	0	1,488
17. Incurred during current year	10	236,833							10	236,833
Settled during current year:										
18.1 By payment in full	10	235,736							10	235,736
18.2 By payment on compromised claims									0	0
18.3 Totals paid	10	235,736	0	0	0	0	0	0	10	235,736
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	10	235,736	0	0	0	0	0	0	10	235,736
19. Unpaid Dec. 31, current year (16+17-18.6)	0	2,585	0	0	0	0	0	0	0	2,585
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	232	5,680,448	0	0	0	0	0	0	232	5,680,448
21. Issued during year									0	0
22. Other changes to in force (Net)	(67)	(2,039,204)							(67)	(2,039,204)
23. In force December 31 of current year	165	3,641,244	0	0	0	0	0	0	165	3,641,244

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	249,142	251,296		169,112	171,222
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	169,274	169,274		81,721	83,075
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	169,274	169,274	0	81,721	83,075
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	418,416	420,570	0	250,833	254,297

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products665 and number of persons insured under
Indemnity only products622



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF South Dakota

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,255				6,255
2. Annuity considerations	295				295
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	6,550	0	0	0	6,550
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	179				179
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	179	0	0	0	179
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	179	0	0	0	179
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	6,607				6,607
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	6,607	0	0	0	6,607
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	193	0	0	0	0	0	0	0	193
17. Incurred during current year		151							0	151
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	344	0	0	0	0	0	0	0	344
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	24	91,930	0	0	0	0	0	0	24	91,930
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	24	91,930	0	0	0	0	0	0	24	91,930

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	247,048	249,184		167,691	169,783
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	471	471		227	231
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	471	471	0	227	231
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	247,519	249,655	0	167,918	170,014

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products56 and number of persons insured under
Indemnity only products704



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Tennessee

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	63,247				63,247
2. Annuity considerations	25,385				25,385
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	88,632	0	0	0	88,632
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	352				352
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	352	0	0	0	352
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	352	0	0	0	352
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	75,000				75,000
10. Matured endowments	5,000				5,000
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	207,664				207,664
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	5	0	0	0	5
14. All other benefits, except accident and health					0
15. Totals	287,669	0	0	0	287,669
DETAILS OF WRITE-INS					
1301. Coupons paid	5				5
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	5	0	0	0	5

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	2,213	0	0	0	0	0	0	0	2,213
17. Incurred during current year	6	81,666							6	81,666
Settled during current year:										
18.1 By payment in full	6	80,000							6	80,000
18.2 By payment on compromised claims	6	80,000	0	0	0	0	0	0	0	0
18.3 Totals paid	6	80,000	0	0	0	0	0	0	6	80,000
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	6	80,000	0	0	0	0	0	0	6	80,000
19. Unpaid Dec. 31, current year (16+17-18.6)	0	3,879	0	0	0	0	0	0	0	3,879
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	162	4,457,098	0	0	0	0	0	0	162	4,457,098
21. Issued during year									0	0
22. Other changes to in force (Net)	(23)	(692,028)							(23)	(692,028)
23. In force December 31 of current year	139	3,765,070	0	0	0	0	0	0	139	3,765,070

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	4,546,330	4,585,628		3,085,943	3,124,440
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	929,832	929,832		448,897	456,335
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	929,832	929,832	0	448,897	456,335
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	5,476,162	5,515,460	0	3,534,840	3,580,775

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products19,027 and number of persons insured under
Indemnity only products78



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Texas

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	111,693				111,693
2. Annuity considerations	99,874				99,874
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	211,566	0	0	0	211,566
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	76				76
6.2 Applied to pay renewal premiums	487				487
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	589				589
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	1,152	0	0	0	1,152
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	1,152	0	0	0	1,152
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	96,084				96,084
10. Matured endowments	2,000				2,000
11. Annuity benefits	3,371				3,371
12. Surrender values and withdrawals for life contracts	208,561				208,561
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	16	0	0	0	16
14. All other benefits, except accident and health					0
15. Totals	310,032	0	0	0	310,032
DETAILS OF WRITE-INS					
1301. Coupons paid	16				16
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	16	0	0	0	16

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	2,966	0	0	0	0	0	0	0	2,966
17. Incurred during current year	5	100,423							5	100,423
Settled during current year:										
18.1 By payment in full	5	98,084							5	98,084
18.2 By payment on compromised claims									0	0
18.3 Totals paid	5	98,084	0	0	0	0	0	0	5	98,084
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	5	98,084	0	0	0	0	0	0	5	98,084
19. Unpaid Dec. 31, current year (16+17-18.6)	0	5,305	0	0	0	0	0	0	0	5,305
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	764	10,890,389	0	0	0	0	0	0	764	10,890,389
21. Issued during year									0	0
22. Other changes to in force (Net)	(28)	(848,462)							(28)	(848,462)
23. In force December 31 of current year	736	10,041,927	0	0	0	0	0	0	736	10,041,927

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	45,790,726	46,186,536		31,081,684	31,469,423
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	2,763,842	2,763,842		1,334,306	1,356,415
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	2,763,842	2,763,842	0	1,334,306	1,356,415
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	48,554,568	48,950,378	0	32,415,990	32,825,838

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products163,175 and number of persons insured under
Indemnity only products362



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF U.S. Virgin Islands

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1 Ordinary	2 Credit Life (Group and Individual)	3 Group	4 Industrial	5 Total
1. Life insurance					.0
2. Annuity considerations					.0
3. Deposit-type contract funds		XXX		XXX	.0
4. Other considerations					.0
5. Totals (Sum of Lines 1 to 4)	0	0	0	0	0
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					.0
6.2 Applied to pay renewal premiums					.0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					.0
6.4 Other					.0
6.5 Totals (Sum of 6.1 to 6.4)	.0	.0	.0	.0	.0
Annuities:					
7.1 Paid in cash or left on deposit					.0
7.2 Applied to provide paid-up annuities					.0
7.3 Other					.0
7.4 Totals (Sum of Lines 7.1 to 7.3)	.0	.0	.0	.0	.0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					.0
10. Matured endowments					.0
11. Annuity benefits					.0
12. Surrender values and withdrawals for life contracts					.0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	.0	.0	.0	.0	.0
14. All other benefits, except accident and health					.0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	.0	.0	.0	.0	.0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
17. Incurred during current year									.0	.0
Settled during current year:										
18.1 By payment in full									.0	.0
18.2 By payment on compromised claims									.0	.0
18.3 Totals paid	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
18.4 Reduction by compromise									.0	.0
18.5 Amount rejected									.0	.0
18.6 Total settlements	.0	.0	.0	.0	.0	.0	.0	.0	.0	.0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	0	0	0	0	0	0	0	0	0
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	.0	.0	.0	(a).0	.0	.0	.0	.0	.0	.0
21. Issued during year									.0	.0
22. Other changes to in force (Net)									.0	.0
23. In force December 31 of current year	0	0	0	(a)0	0	0	0	0	0	0

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1 Direct Premiums	2 Direct Premiums Earned	3 Dividends Paid Or Credited On Direct Business	4 Direct Losses Paid	5 Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)					
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	.0	.0	.0	.0	.0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Utah

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	16,195				16,195
2. Annuity considerations	4,225				4,225
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	20,420	0	0	0	20,420
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	9,851				9,851
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	22,401				22,401
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	3	0	0	0	3
14. All other benefits, except accident and health					0
15. Totals	32,255	0	0	0	32,255
DETAILS OF WRITE-INS					
1301. Coupons paid	3				3
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	3	0	0	0	3

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	582	0	0	0	0	0	0	0	582
17. Incurred during current year	0	10,347							0	10,347
Settled during current year:										
18.1 By payment in full	0	9,851							0	9,851
18.2 By payment on compromised claims	0	9,851	0	0	0	0	0	0	0	0
18.3 Totals paid	0	9,851	0	0	0	0	0	0	0	9,851
18.4 Reduction by compromise									0	0
18.5 Amount rejected	0	9,851	0	0	0	0	0	0	0	0
18.6 Total settlements	0	9,851	0	0	0	0	0	0	0	9,851
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,078	0	0	0	0	0	0	0	1,078
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	46	1,992,088	0	0	0	0	0	0	46	1,992,088
21. Issued during year									0	0
22. Other changes to in force (Net)	(3)	(85,215)							(3)	(85,215)
23. In force December 31 of current year	43	1,906,873	0	0	0	0	0	0	43	1,906,873

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	3,312,703	3,341,337		2,248,586	2,276,637
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	371,164	371,164		179,188	182,157
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	371,164	371,164	0	179,188	182,157
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	3,683,867	3,712,501	0	2,427,774	2,458,794

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products11,117 and number of persons insured under
Indemnity only products85



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Vermont

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	2,034				2,034
2. Annuity considerations	1,232				1,232
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	3,266	0	0	0	3,266
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts					0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	139	0	0	0	0	0	0	0	139
17. Incurred during current year		117							0	117
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	255	0	0	0	0	0	0	0	255
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	13	557,087	0	(a)0	0	0	0	0	13	557,087
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	13	557,087	0	(a)0	0	0	0	0	13	557,087

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....					
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	186	186		90	91
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	186	186	0	90	91
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	186	186	0	90	91

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Virginia

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	134,840				134,840
2. Annuity considerations	53,034				53,034
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	187,874	0	0	0	187,874
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	101				101
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	101	0	0	0	101
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	101	0	0	0	101
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	161,384				161,384
10. Matured endowments	1,000				1,000
11. Annuity benefits	1,974				1,974
12. Surrender values and withdrawals for life contracts	180,015				180,015
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	344,373	0	0	0	344,373
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	4,758	0	0	0	0	0	0	0	4,758
17. Incurred during current year	8	166,208							8	166,208
Settled during current year:										
18.1 By payment in full	8	162,384							8	162,384
18.2 By payment on compromised claims									0	0
18.3 Totals paid	8	162,384	0	0	0	0	0	0	8	162,384
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	8	162,384	0	0	0	0	0	0	8	162,384
19. Unpaid Dec. 31, current year (16+17-18.6)	0	8,581	0	0	0	0	0	0	0	8,581
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	505	18,744,691	0	0	0	0	0	0	505	18,744,691
21. Issued during year									0	0
22. Other changes to in force (Net)	(46)	(1,404,683)							(46)	(1,404,683)
23. In force December 31 of current year	459	17,340,008	0	0	0	0	0	0	459	17,340,008

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	6,964,419	7,024,619		4,727,287	4,786,259
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	197,057	197,057		95,134	96,710
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	197,057	197,057	0	95,134	96,710
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	7,161,476	7,221,676	0	4,822,421	4,882,969

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 21,317 and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Washington

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	10,252				10,252
2. Annuity considerations	2,258				2,258
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	12,510	0	0	0	12,510
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	381				381
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	384				384
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	765	0	0	0	765
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	765	0	0	0	765
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments	4,500				4,500
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	2,944				2,944
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	2	0	0	0	2
14. All other benefits, except accident and health					0
15. Totals	7,446	0	0	0	7,446
DETAILS OF WRITE-INS					
1301. Coupons paid	2				2
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	2	0	0	0	2

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	476	0	0	0	0	0	0	0	476
17. Incurred during current year	2	4,950							2	4,950
Settled during current year:										
18.1 By payment in full	2	4,500							2	4,500
18.2 By payment on compromised claims									0	0
18.3 Totals paid	2	4,500	0	0	0	0	0	0	2	4,500
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	2	4,500	0	0	0	0	0	0	2	4,500
19. Unpaid Dec. 31, current year (16+17-18.6)	0	926	0	0	0	0	0	0	0	926
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	111	1,758,268	0	0	0	0	0	0	111	1,758,268
21. Issued during year									0	0
22. Other changes to in force (Net)	(1)	(38,927)							(1)	(38,927)
23. In force December 31 of current year	110	1,719,341	0	0	0	0	0	0	110	1,719,341

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)					
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	1,962	1,962		947	963
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	1,962	1,962	0	947	963
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	1,962	1,962	0	947	963

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF West Virginia

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	14,554				14,554
2. Annuity considerations	3,251				3,251
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	17,805	0	0	0	17,805
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	7,785				7,785
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	7,785	0	0	0	7,785
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	598	0	0	0	0	0	0	0	598
17. Incurred during current year		403							0	403
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	1,002	0	0	0	0	0	0	0	1,002
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	53	2,122,203	0	0	0	0	0	0	53	2,122,203
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	53	2,122,203	0	0	0	0	0	0	53	2,122,203

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b).....	678,674	684,541		460,668	466,415
24.1 Federal Employees Health Benefits Program premium (b).....					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b).....					
24.4 Medicare Title XVIII exempt from state taxes or fees.....					
Other Individual Policies:					
25.1 Non-cancelable (b).....					
25.2 Guaranteed renewable (b).....					
25.3 Non-renewable for stated reasons only (b).....	758	757		366	372
25.4 Other accident only					
25.5 All other (b).....					
25.6 Totals (Sum of Lines 25.1 to 25.5)	758	757	0	366	372
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	679,432	685,298	0	461,034	466,787

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products2,539 and number of persons insured under
Indemnity only products1,188



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Wisconsin

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	820,253				820,253
2. Annuity considerations	183,500				183,500
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	1,003,753	0	0	0	1,003,753
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	9,141				9,141
6.2 Applied to pay renewal premiums	4,566				4,566
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	50,118				50,118
6.4 Other	1,688				1,688
6.5 Totals (Sum of 6.1 to 6.4)	65,513	0	0	0	65,513
Annuities:					
7.1 Paid in cash or left on deposit	12,726				12,726
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	12,726	0	0	0	12,726
8. Grand Totals (Lines 6.5 plus 7.4)	78,239	0	0	0	78,239
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	1,103,517				1,103,517
10. Matured endowments	73,403				73,403
11. Annuity benefits	94,477				94,477
12. Surrender values and withdrawals for life contracts	1,333,921				1,333,921
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	1,685	0	0	0	1,685
14. All other benefits, except accident and health					0
15. Totals	2,607,003	0	0	0	2,607,003
DETAILS OF WRITE-INS					
1301. Coupons paid	1,685				1,685
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	1,685	0	0	0	1,685

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	10	392,801	0	0	0	0	0	0	10	392,801
17. Incurred during current year	77	941,525							77	941,525
Settled during current year:										
18.1 By payment in full	81	1,176,921							81	1,176,921
18.2 By payment on compromised claims									0	0
18.3 Totals paid	81	1,176,921	0	0	0	0	0	0	81	1,176,921
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	81	1,176,921	0	0	0	0	0	0	81	1,176,921
19. Unpaid Dec. 31, current year (16+17-18.6)	6	157,405	0	0	0	0	0	0	6	157,405
POLICY EXHIBIT					No. of Policies					
20. In force December 31, prior year	5,238	109,635,042	0	0	0	0	0	0	5,238	109,635,042
21. Issued during year									0	0
22. Other changes to in force (Net)	(354)	(11,569,323)							(354)	(11,569,323)
23. In force December 31 of current year	4,884	98,065,719	0	0	0	0	0	0	4,884	98,065,719

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	17,098,210	17,246,005		11,605,869	11,750,650
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	767,564	767,564		370,559	376,699
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	767,564	767,564	0	370,559	376,699
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	17,865,774	18,013,569	0	11,976,428	12,127,349

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products61,813 and number of persons insured under
Indemnity only products87



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Wyoming

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	4,312				4,312
2. Annuity considerations	195				195
3. Deposit-type contract funds		XXX		XXX	0
4. Other considerations					0
5. Totals (Sum of Lines 1 to 4)	4,507	0	0	0	4,507
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit					0
6.2 Applied to pay renewal premiums					0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period					0
6.4 Other					0
6.5 Totals (Sum of 6.1 to 6.4)	0	0	0	0	0
Annuities:					
7.1 Paid in cash or left on deposit					0
7.2 Applied to provide paid-up annuities					0
7.3 Other					0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	0	0	0	0	0
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits					0
10. Matured endowments					0
11. Annuity benefits					0
12. Surrender values and withdrawals for life contracts	86				86
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health					0
15. Totals	86	0	0	0	86
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	104	0	0	0	0	0	0	0	104
17. Incurred during current year		87							0	87
Settled during current year:										
18.1 By payment in full									0	0
18.2 By payment on compromised claims									0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise									0	0
18.5 Amount rejected									0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	191	0	0	0	0	0	0	0	191
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	17	452,360	0	0	0	0	0	0	17	452,360
21. Issued during year									0	0
22. Other changes to in force (Net)									0	0
23. In force December 31 of current year	17	452,360	0	0	0	0	0	0	17	452,360

(a) Includes Individual Credit Life Insurance: prior year \$ current year \$
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ current year \$
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ current year \$

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	98,036	98,884		66,545	67,375
24.1 Federal Employees Health Benefits Program premium (b)					
24.2 Credit (Group and Individual)					
24.3 Collectively Renewable Policies (b)					
24.4 Medicare Title XVIII exempt from state taxes or fees					
Other Individual Policies:					
25.1 Non-cancelable (b)					
25.2 Guaranteed renewable (b)					
25.3 Non-renewable for stated reasons only (b)	127	127		61	62
25.4 Other accident only					
25.5 All other (b)					
25.6 Totals (Sum of Lines 25.1 to 25.5)	127	127	0	61	62
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	98,163	99,011	0	66,606	67,437

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products and number of persons insured under
Indemnity only products165



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Grand Aliens

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	5,775	0	0	0	5,775
2. Annuity considerations	255	0	0	0	255
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	6,030	0	0	0	6,030
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	0	0	0	0	0
6.2 Applied to pay renewal premiums	0	0	0	0	0
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	474	0	0	0	474
6.4 Other	0	0	0	0	0
6.5 Totals (Sum of 6.1 to 6.4)	474	0	0	0	474
Annuities:					
7.1 Paid in cash or left on deposit	0	0	0	0	0
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	0	0	0	0	0
8. Grand Totals (Lines 6.5 plus 7.4)	474	0	0	0	474
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	0	0	0	0	0
10. Matured endowments	0	0	0	0	0
11. Annuity benefits	0	0	0	0	0
12. Surrender values and withdrawals for life contracts	0	0	0	0	0
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	0	0	0	0	0
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	0	0	0	0	0
DETAILS OF WRITE-INS					
1301.					
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	0	0	0	0	0

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	0	175	0	0	0	0	0	0	0	175
17. Incurred during current year	0	360	0	0	0	0	0	0	0	360
Settled during current year:										
18.1 By payment in full	0	0	0	0	0	0	0	0	0	0
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	0	0	0	0	0	0	0	0	0	0
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	0	0	0	0	0	0	0	0	0	0
19. Unpaid Dec. 31, current year (16+17-18.6)	0	535	0	0	0	0	0	0	0	535
POLICY EXHIBIT										
20. In force December 31, prior year	1	288,106	(a)	0	No. of Policies	0	0	0	1	288,106
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	0	0	0	0	0	0	0	0	0	0
23. In force December 31 of current year	1	288,106	(a)	0	0	0	0	0	1	288,106

(a) Includes Individual Credit Life Insurance: prior year \$ 0 current year \$ 0
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ 0 current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	0	0	0	0	0
24.1 Federal Employees Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively Renewable Policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	0	0	0	0	0
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	0	0	0	0	0
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	0	0	0	0	0

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 0 and number of persons insured under Indemnity only products 0



ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

DIRECT BUSINESS IN THE STATE OF Consolidated

DURING THE YEAR 2008

NAIC Group Code 0119

LIFE INSURANCE

NAIC Company Code 70580

DIRECT PREMIUMS AND ANNUITY CONSIDERATIONS	1	2	3	4	5
	Ordinary	Credit Life (Group and Individual)	Group	Industrial	Total
1. Life insurance	6,734,998	0	0	0	6,734,998
2. Annuity considerations	2,507,710	0	0	0	2,507,710
3. Deposit-type contract funds	0	XXX	0	XXX	0
4. Other considerations	0	0	0	0	0
5. Totals (Sum of Lines 1 to 4)	9,242,709	0	0	0	9,242,709
DIRECT DIVIDENDS TO POLICYHOLDERS					
Life insurance:					
6.1 Paid in cash or left on deposit	19,951	0	0	0	19,951
6.2 Applied to pay renewal premiums	11,531	0	0	0	11,531
6.3 Applied to provide paid-up additions or shorten the endowment or premium-paying period	116,742	0	0	0	116,742
6.4 Other	2,026	0	0	0	2,026
6.5 Totals (Sum of 6.1 to 6.4)	150,251	0	0	0	150,251
Annuities:					
7.1 Paid in cash or left on deposit	16,056	0	0	0	16,056
7.2 Applied to provide paid-up annuities	0	0	0	0	0
7.3 Other	0	0	0	0	0
7.4 Totals (Sum of Lines 7.1 to 7.3)	16,056	0	0	0	16,056
8. Grand Totals (Lines 6.5 plus 7.4)	166,307	0	0	0	166,307
DIRECT CLAIMS AND BENEFITS PAID					
9. Death benefits	5,780,774	0	0	0	5,780,774
10. Matured endowments	178,059	0	0	0	178,059
11. Annuity benefits	450,173	0	0	0	450,173
12. Surrender values and withdrawals for life contracts	13,224,617	0	0	0	13,224,617
13. Aggregate write-ins for miscellaneous direct claims and benefits paid	15,677	0	0	0	15,677
14. All other benefits, except accident and health	0	0	0	0	0
15. Totals	19,649,300	0	0	0	19,649,300
DETAILS OF WRITE-INS					
1301. Coupons paid	15,677				15,677
1302.					
1303.					
1398. Summary of Line 13 from overflow page	0	0	0	0	0
1399. Totals (Lines 1301 thru 1303 plus 1398) (Line 13 above)	15,677	0	0	0	15,677

DIRECT DEATH BENEFITS AND MATURED ENDOWMENTS INCURRED	Ordinary		Credit Life (Group and Individual)		Group		Industrial		Total	
	1	2	3	4	5	6	7	8	9	10
	No.	Amount	No. of Ind. Pols. & Gr. Certifs.	Amount	No. of Certifs.	Amount	No.	Amount	No.	Amount
16. Unpaid December 31, prior year	32	1,106,629	0	0	0	0	0	0	32	1,106,629
17. Incurred during current year	315	5,559,588	0	0	0	0	0	0	315	5,559,588
Settled during current year:										
18.1 By payment in full	333	5,958,833	0	0	0	0	0	0	333	5,958,833
18.2 By payment on compromised claims	0	0	0	0	0	0	0	0	0	0
18.3 Totals paid	333	5,958,833	0	0	0	0	0	0	333	5,958,833
18.4 Reduction by compromise	0	0	0	0	0	0	0	0	0	0
18.5 Amount rejected	0	0	0	0	0	0	0	0	0	0
18.6 Total settlements	333	5,958,833	0	0	0	0	0	0	333	5,958,833
19. Unpaid Dec. 31, current year (16+17-18.6)	14	707,384	0	0	0	0	0	0	14	707,384
POLICY EXHIBIT						No. of Policies				
20. In force December 31, prior year	29,339	811,786,859	(a)	0	0	0	0	0	29,339	811,786,859
21. Issued during year	0	0	0	0	0	0	0	0	0	0
22. Other changes to in force (Net)	(1,694)	(51,546,019)	0	0	0	0	0	0	(1,694)	(51,546,019)
23. In force December 31 of current year	27,645	760,240,840	(a)	0	0	0	0	0	27,645	760,240,840

(a) Includes Individual Credit Life Insurance: prior year \$ 0 current year \$ 0
Includes Group Credit Life Insurance: Loans less than or equal to 60 months at issue, prior year \$ 0 current year \$ 0
Loans greater than 60 months at issue BUT NOT GREATER THAN 120 MONTHS, prior year \$ 0 current year \$ 0

ACCIDENT AND HEALTH INSURANCE

	1	2	3	4	5
	Direct Premiums	Direct Premiums Earned	Dividends Paid Or Credited On Direct Business	Direct Losses Paid	Direct Losses Incurred
24. Group Policies (b)	278,575,100	280,983,073	0	189,090,327	191,449,199
24.1 Federal Employees Health Benefits Program premium (b)	0	0	0	0	0
24.2 Credit (Group and Individual)	0	0	0	0	0
24.3 Collectively Renewable Policies (b)	0	0	0	0	0
24.4 Medicare Title XVIII exempt from state taxes or fees	0	0	0	0	0
Other Individual Policies:					
25.1 Non-cancelable (b)	0	0	0	0	0
25.2 Guaranteed renewable (b)	0	0	0	0	0
25.3 Non-renewable for stated reasons only (b)	15,490,909	15,490,907	0	7,478,582	7,602,501
25.4 Other accident only	0	0	0	0	0
25.5 All other (b)	0	0	0	0	0
25.6 Totals (Sum of Lines 25.1 to 25.5)	15,490,909	15,490,907	0	7,478,582	7,602,501
26. Totals (Lines 24 + 24.1 + 24.2 + 24.3 + 24.4 + 25.6)	294,066,009	296,473,980	0	196,568,909	199,051,700

(b) For health business on indicated lines report: Number of persons insured under PPO managed care products 880,629 and number of persons insured under Indemnity only products 20,033

FORM FOR CALCULATING THE INTEREST MAINTENANCE RESERVE

Interest Maintenance Reserve		1 Amount
1. Reserve as of December 31, prior year		138,596
2. Current year's realized pre-tax capital gains/(losses) of \$ transferred into the Reserve Net of Taxes of \$		406,378
3. Adjustment for current year's liability gains/(losses) released from the reserve		0
4. Balance before reduction for amount transferred to Summary of Operations (Line 1 + Line 2 + Line 3)		544,974
5. Current year's amortization released to Summary of Operations (Amortization, Line 1, Column 4)		95,053
6. Reserve as of December 31, current year (Line 4 minus Line 5)		449,922

AMORTIZATION				
Year of Amortization	1 Reserve as of December 31, Prior Year	2 Current Year's Realized Capital Gains/(Losses) Transferred into the Reserve Net of Taxes	3 Adjustment for Current Year's Liability Gains/(Losses) Released From the Reserve	4 Balance Before Reduction for Current Year's Amortization (Cols. 1+2+3)
1. 2008	13,066	81,986	0	95,053
2. 2009	13,829	97,860	0	111,689
3. 2010	14,541	54,824	0	69,365
4. 2011	13,625	46,577	0	60,202
5. 2012	11,137	38,037	0	49,174
6. 2013	8,403	28,849	0	37,253
7. 2014	6,037	22,571	0	28,608
8. 2015	3,931	19,576	0	23,508
9. 2016	3,647	16,116	0	19,763
10. 2017	4,225	12,891	0	17,115
11. 2018	4,101	9,023	0	13,124
12. 2019	3,488	6,302	0	9,789
13. 2020	2,880	4,697	0	7,576
14. 2021	2,706	2,799	0	5,505
15. 2022	2,723	1,010	0	3,733
16. 2023	2,565	(1,014)	0	1,551
17. 2024	2,370	(2,116)	0	254
18. 2025	2,320	(2,204)	0	116
19. 2026	2,400	(2,344)	0	56
20. 2027	2,646	(2,429)	0	217
21. 2028	2,790	(2,567)	0	223
22. 2029	2,984	(2,658)	0	326
23. 2030	3,191	(2,866)	0	325
24. 2031	3,032	(2,965)	0	68
25. 2032	2,459	(3,172)	0	(712)
26. 2033	1,837	(3,378)	0	(1,541)
27. 2034	1,169	(3,154)	0	(1,985)
28. 2035	449	(2,502)	0	(2,052)
29. 2036	43	(1,849)	0	(1,806)
30. 2037	0	(1,142)	0	(1,142)
31. 2038 and Later	0	(381)	0	(381)
32. Total (Lines 1 to 31)	138,596	406,378	0	544,974

ASSET VALUATION RESERVE

	Default Component			Equity Component			7 Total Amount (Cols. 3+6)
	1 Other Than Mortgage Loans	2 Mortgage Loans	3 Total (Cols. 1+2)	4 Common Stock	5 Real Estate and Other Invested Assets	6 Total (Cols. 4+5)	
1. Reserve as of December 31, prior year	210,390	0	210,390	0	0	0	210,390
2. Realized capital gains/(losses) net of taxes - General Account	(916,174)		(916,174)			0	(916,174)
3. Realized capital gains/(losses) net of taxes - Separate Accounts			0			0	0
4. Unrealized capital gains/(losses) net of deferred taxes - General Account			0			0	0
5. Unrealized capital gains/(losses) net of deferred taxes - Separate Accounts			0			0	0
6. Capital gains credited/(losses charged) to contract benefits, payments or reserves			0			0	0
7. Basic contribution	47,403	0	47,403	0	0	0	47,403
8. Accumulated balances (Lines 1 through 5 - 6 + 7).....	(658,381)	0	(658,381)	0	0	0	(658,381)
9. Maximum reserve	247,413	0	247,413	345,215	0	345,215	592,628
10. Reserve objective.....	178,932	0	178,932	345,215	0	345,215	524,148
11. 20% of (Line 10 - Line 8)	167,463	0	167,463	69,043	0	69,043	236,506
12. Balance before transfers (Lines 8 + 11)	(490,918)	0	(490,918)	69,043	0	69,043	(421,875)
13. Transfers			0			0	XXX
14. Voluntary contribution			0			0	0
15. Adjustment down to maximum/up to zero	490,918		490,918			0	490,918
16. Reserve as of December 31, current year (Lines 12 + 13 + 14 + 15)	0	0	0	69,043	0	69,043	69,043

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Num- ber	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)
LONG-TERM BONDS												
1		Exempt Obligations	25,309,359	.XXX.	.XXX.	25,309,359	0.0000	0	0.0000	0	0.0000	0
2	1	Highest Quality	42,229,491	.XXX.	.XXX.	42,229,491	0.0004	16,892	0.0023	97,128	0.0030	126,688
3	2	High Quality	3,830,203	.XXX.	.XXX.	3,830,203	0.0019	7,277	0.0058	22,215	0.0090	34,472
4	3	Medium Quality	1,757,926	.XXX.	.XXX.	1,757,926	0.0093	16,349	0.0230	40,432	0.0340	59,769
5	4	Low Quality	301,688	.XXX.	.XXX.	301,688	0.0213	6,426	0.0530	15,989	0.0750	22,627
6	5	Lower Quality	7,350	.XXX.	.XXX.	7,350	0.0432	318	0.1100	809	0.1700	1,250
7	6	In or Near Default	7,725	.XXX.	.XXX.	7,725	0.0000	0	0.2000	1,545	0.2000	1,545
8		Total Unrated Multi-Class Securities Acquired by Conversion .....		.XXX.	.XXX.	0	.XXX.	0	.XXX.	0	.XXX.	0
9		Total Bonds (Sum of Lines 1 through 8) (Page 2, Line 1, Net Admitted Asset)	73,443,742	.XXX.	.XXX.	73,443,742	.XXX.	47,261	.XXX.	178,118	.XXX.	246,351
PREFERRED STOCK												
10	1	Highest Quality	349,160	.XXX.	.XXX.	349,160	0.0004	140	0.0023	803	0.0030	1,047
11	2	High Quality .....		.XXX.	.XXX.	0	0.0019	0	0.0058	0	0.0090	0
12	3	Medium Quality .....		.XXX.	.XXX.	0	0.0093	0	0.0230	0	0.0340	0
13	4	Low Quality .....		.XXX.	.XXX.	0	0.0213	0	0.0530	0	0.0750	0
14	5	Lower Quality .....		.XXX.	.XXX.	0	0.0432	0	0.1100	0	0.1700	0
15	6	In or Near Default .....		.XXX.	.XXX.	0	0.0000	0	0.2000	0	0.2000	0
16		Affiliated Life with AVR .....		.XXX.	.XXX.	0	0.0000	0	0.0000	0	0.0000	0
17		Total Preferred Stocks (Sum of Lines 10 thru 16) (Page 2, Line 2.1, Net Admitted Asset)	349,160	.XXX.	.XXX.	349,160	.XXX.	140	.XXX.	803	.XXX.	1,047
SHORT-TERM BONDS												
18		Exempt Obligations	5,992,592	.XXX.	.XXX.	5,992,592	0.0000	0	0.0000	0	0.0000	0
19	1	Highest Quality	4,800	.XXX.	.XXX.	4,800	0.0004	2	0.0023	11	0.0030	14
20	2	High Quality .....		.XXX.	.XXX.	0	0.0019	0	0.0058	0	0.0090	0
21	3	Medium Quality .....		.XXX.	.XXX.	0	0.0093	0	0.0230	0	0.0340	0
22	4	Low Quality .....		.XXX.	.XXX.	0	0.0213	0	0.0530	0	0.0750	0
23	5	Lower Quality .....		.XXX.	.XXX.	0	0.0432	0	0.1100	0	0.1700	0
24	6	In or Near Default .....		.XXX.	.XXX.	0	0.0000	0	0.2000	0	0.2000	0
25		Total Short-term Bonds (Sum of lines 18 thru 24)	5,997,392	.XXX.	.XXX.	5,997,392	.XXX.	2	.XXX.	11	.XXX.	14

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
DEFAULT COMPONENT

Line Num- ber	NAIC Designation	Description	1	2	3	4	Basic Contribution		Reserve Objective		Maximum Reserve		
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Cols. 1+2+3)	5	6	7	8	9	10	
							Factor	Amount (Cols. 4x5)	Factor	Amount (Cols. 4x7)	Factor	Amount (Cols. 4x9)	
DERIVATIVE INSTRUMENTS													
26	1 2 3 4 5 6	Exchange Traded		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0	
27		Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0	
28		High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0	
29		Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0	
30		Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0	
31		Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0	
32		In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0	
33		Total Derivative Instruments	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0	
34		TOTAL (Line 9 + 17 + 25 + 33)	79,790,294	XXX	XXX	79,790,294	XXX	47,403	XXX	178,932	XXX	247,413	
MORTGAGE LOANS													
In Good Standing:													
35		Farm Mortgages			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0	
36		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0	
37		Residential Mortgages - All Other			XXX	0	0.0013	0	0.0030	0	0.0040	0	
38		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0	
39		Commercial Mortgages - All Other			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0	
40		In Good Standing With Restructured Terms			XXX	0	0.2800 (b)	0	0.6200 (b)	0	1.0000 (b)	0	
Overdue, Not in Process:													
41		Farm Mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0	
42		Residential Mortgages - Insured of Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0	
43		Residential Mortgages - All Other			XXX	0	0.0025	0	0.0058	0	0.0090	0	
44		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0	
45		Commercial Mortgages - All Other			XXX	0	0.0420	0	0.0760	0	0.1200	0	
In Process of Foreclosure:													
46		Farm Mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0	
47		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0	
48		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0130	0	0.0130	0	
49		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0	
50		Commercial Mortgages - All Other			XXX	0	0.0000	0	0.1700	0	0.1700	0	
51			Total Schedule B Mortgages (Sum of Lines 35 thru 50) (Page 2, Line 3, Net Admitted Asset)	0	0	XXX	0	XXX	0	XXX	0	XXX	0
52		Total Schedule DA Mortgages			XXX	0	(c)	0	(c)	0	(c)	0	
53		Total Mortgage Loans on Real Estate (Line 51 + 52)	0	0	XXX	0	XXX	0	XXX	0	XXX	0	

(a) Times the Company's Experience Adjustment Factor (EAF).
(b) Column 9 is the greater of 6.4% without any EAF adjustments or a Company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.
(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.

ASSET VALUATION RESERVE
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
COMMON STOCK												
1		Unaffiliated - Public	2,655,501	XXX	XXX	2,655,501	0.0000	.0	0.1300 ^(d)	345,215	0.1300 ^(d)	345,215
2		Unaffiliated - Private		XXX	XXX	.0	0.0000	.0	0.1600	.0	0.1600	.0
3		Federal Home Loan Bank		XXX	XXX	.0	0.0000	.0	0.0050	.0	0.0080	.0
4		Affiliated - Life with AVR		XXX	XXX	.0	0.0000	.0	0.0000	.0	0.0000	.0
Affiliated - Investment Subsidiary:												
5		Fixed Income - Exempt Obligations .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
6		Fixed Income - Highest Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
7		Fixed Income - High Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
8		Fixed Income - Medium Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
9		Fixed Income - Low Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
10		Fixed Income - Lower Quality .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
11		Fixed Income - In/Near Default .....	.0	.0	.0	.0	XXX	.0	XXX	.0	XXX	.0
12		Unaffiliated Common Stock - Public .....				.0	0.0000	.0	0.1300 ^(d)	.0	0.1300 ^(d)	.0
13		Unaffiliated Common Stock - Private .....				.0	0.0000	.0	0.1600	.0	0.1600	.0
14		Mortgage Loans .....				.0	^(c)	.0	^(c)	.0	^(c)	.0
15		Real Estate .....				.0	^(e)	.0	^(e)	.0	^(e)	.0
16		Affiliated - Certain Other (See SVO Purposes and Procedures Manual)		XXX	XXX	.0	0.0000	.0	0.1300	.0	0.1300	.0
17		Affiliated - All Other		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
18		Total Common Stock (Sum of Lines 1 thru 17)(Page 2, Line 2.2, Net Admitted Asset)	2,655,501	0	0	2,655,501	XXX	0	XXX	345,215	XXX	345,215
REAL ESTATE												
19		Home Office Property (General Account only) .....				.0	0.0000	.0	0.0750	.0	0.0750	.0
20		Investment Properties .....				.0	0.0000	.0	0.0750	.0	0.0750	.0
21		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1100	0	0.1100	0
22		Total Real Estate (Sum of Lines 19 thru 21)	0	0	0	0	XXX	0	XXX	0	XXX	0
OTHER INVESTED ASSETS												
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF BONDS												
23		Exempt Obligations		XXX	XXX	.0	0.0000	.0	0.0000	.0	0.0000	.0
24	1	Highest Quality		XXX	XXX	.0	0.0004	.0	0.0023	.0	0.0030	.0
25	2	High Quality		XXX	XXX	.0	0.0019	.0	0.0058	.0	0.0090	.0
26	3	Medium Quality		XXX	XXX	.0	0.0093	.0	0.0230	.0	0.0340	.0
27	4	Low Quality		XXX	XXX	.0	0.0213	.0	0.0530	.0	0.0750	.0
28	5	Lower Quality		XXX	XXX	.0	0.0432	.0	0.1100	.0	0.1700	.0
29	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
30		Total with Bond characteristics (Sum of Lines 23 thru 29)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF PREFERRED STOCKS										
31	1	Highest Quality		XXX	XXX	0	0.0004	0	0.0023	0	0.0030	0
32	2	High Quality		XXX	XXX	0	0.0019	0	0.0058	0	0.0090	0
33	3	Medium Quality		XXX	XXX	0	0.0093	0	0.0230	0	0.0340	0
34	4	Low Quality		XXX	XXX	0	0.0213	0	0.0530	0	0.0750	0
35	5	Lower Quality		XXX	XXX	0	0.0432	0	0.1100	0	0.1700	0
36	6	In or Near Default		XXX	XXX	0	0.0000	0	0.2000	0	0.2000	0
37		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
38		Total with Preferred Stock characteristics (Sum of Lines 31 thru 37)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
		INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF MORTGAGE LOANS										
		In Good Standing:										
39		Farm Mortgages			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
40		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
41		Residential Mortgages - All Other		XXX	XXX	0	0.0013	0	0.0030	0	0.0040	0
42		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0003	0	0.0006	0	0.0010	0
43		Commercial Mortgages - All Other			XXX	0	0.0063 (a)	0	0.0120 (a)	0	0.0190 (a)	0
44		In Good Standing With Restructured Terms			XXX	0	0.2800 (b)	0	0.6200 (b)	0	1.0000 (b)	0
		Overdue, Not in Process:										
45		Farm Mortgages			XXX	0	0.0420	0	0.0760	0	0.1200	0
46		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
47		Residential Mortgages - All Other			XXX	0	0.0025	0	0.0058	0	0.0090	0
48		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0005	0	0.0012	0	0.0020	0
49		Commercial Mortgages - All Other			XXX	0	0.0420	0	0.0760	0	0.1200	0
		In Process of Foreclosure:										
50		Farm Mortgages			XXX	0	0.0000	0	0.1700	0	0.1700	0
51		Residential Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
52		Residential Mortgages - All Other			XXX	0	0.0000	0	0.0130	0	0.0130	0
53		Commercial Mortgages - Insured or Guaranteed			XXX	0	0.0000	0	0.0040	0	0.0040	0
54		Commercial Mortgages - All Other			XXX	0	0.0000	0	0.1700	0	0.1700	0
55		Total with Mortgage Loan Characteristics (Sum of Lines 39 thru 54)	0	0	XXX	0	XXX	0	XXX	0	XXX	0

ASSET VALUATION RESERVE (Continued)
BASIC CONTRIBUTION, RESERVE OBJECTIVE AND MAXIMUM RESERVE CALCULATIONS
EQUITY AND OTHER INVESTED ASSET COMPONENT

Line Number	NAIC Designation	Description	1	2	3	4	BASIC CONTRIBUTION		RESERVE OBJECTIVE		MAXIMUM RESERVE	
			Book/Adjusted Carrying Value	Reclassify Related Party Encumbrances	Add Third Party Encumbrances	Balance for AVR Reserve Calculations (Col. 1 + 2 + 3)	5	6	7	8	9	10
							Factor	Amount (Cols. 4 x 5)	Factor	Amount (Cols. 4 x 7)	Factor	Amount (Cols. 4 x 9)
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF COMMON STOCKS												
56		Unaffiliated Public		XXX	XXX	0	0.0000	0	0.1300 ^(d)	0	0.1300 ^(d)	0
57		Unaffiliated Private		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
58		Affiliated Life with AVR		XXX	XXX	0	0.0000	0	0.0000	0	0.0000	0
59		Affiliated Certain Other (See SVO Purposes & Procedures Manual)		XXX	XXX	0	0.0000	0	0.1300	0	0.1300	0
60		Affiliated Other - All Other		XXX	XXX	0	0.0000	0	0.1600	0	0.1600	0
61		Total with Common Stock characteristics (Sum of Lines 56 thru 60)	0	XXX	XXX	0	XXX	0	XXX	0	XXX	0
INVESTMENTS WITH THE UNDERLYING CHARACTERISTICS OF REAL ESTATE												
62		Home Office Property (General Account only)				0	0.0000	0	0.0750	0	0.0750	0
63		Investment Properties				0	0.0000	0	0.0750	0	0.0750	0
64		Properties Acquired in Satisfaction of Debt				0	0.0000	0	0.1100	0	0.1100	0
65		Total with Real Estate Characteristics (Lines 62 thru 64)	0	0	0	0	XXX	0	XXX	0	XXX	0
LOW INCOME HOUSING TAX CREDIT INVESTMENTS												
66		Guaranteed Federal Low Income Housing Tax Credit	0			0	0.0003	0	0.0006	0	0.0010	0
67		Non-guaranteed Federal Low Income Housing Tax Credit	0			0	0.0063	0	0.0120	0	0.0190	0
68		State Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
69		All Other Low Income Housing Tax Credit	0			0	0.0273	0	0.0600	0	0.0975	0
70		Total LIHTC	0	0	0	0	XXX	0	XXX	0	XXX	0
ALL OTHER INVESTMENTS												
71		Other Invested Assets - Schedule BA		XXX		0	0.0000	0	0.1300	0	0.1300	0
72		Other Short Term Invested Assets - Schedule DA		XXX		0	0.0000	0	0.1300	0	0.1300	0
73		Total All Other (Sum of Lines 71 + 72)	0	XXX	0	0	XXX	0	XXX	0	XXX	0
74		Total Other Invested Assets - Schedules BA & DA (Sum of Lines 30, 38, 55, 61, 65, 70 and 73)	0	0	0	0	XXX	0	XXX	0	XXX	0

(a) Times the Company's Experience Adjustment Factor (EAF).
(b) Column 9 is the greater of 6.4% without any EAF adjustments or a Company's EAF adjusted In Good Standing (IGS) factor plus 150 basis points. Columns 5 and 7 are 28% and 62% respectively of Column 9.
(c) Determined using the same factors and breakdowns used for directly owned mortgage loans.
(d) Times the company's weighted average portfolio beta (Minimum .10, Maximum .20).
(e) Determined using same factors and breakdowns used for directly owned real estate.

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT

		Total		Group Accident and Health		Credit Accident and Health (Group and Individual)		Collectively Renewable		Other Individual Contracts									
										Non-Cancelable		Guaranteed Renewable		Non-Renewable for Stated Reasons Only		Other Accident Only		All Other	
		1 Amount	2 %	3 Amount	4 %	5 Amount	6 %	7 Amount	8 %	9 Amount	10 %	11 Amount	12 %	13 Amount	14 %	15 Amount	16 %	17 Amount	18 %
PART 1 - ANALYSIS OF UNDERWRITING OPERATIONS																			
1.	Premiums written	294,327,520	XXX.	278,824,575	XXX.		XXX.		XXX.		XXX.		XXX.	15,502,945	XXX.		XXX.		XXX.
2.	Premiums earned	296,427,719	XXX.	280,983,073	XXX.	0	XXX.	0	XXX.	0	XXX.	0	XXX.	15,444,646	XXX.	0	XXX.	0	XXX.
3.	Incurred claims	198,822,132	67.1	191,449,199	68.1		0.0		0.0		0.0		0.0	7,372,933	47.7		0.0		0.0
4.	Cost containment expenses	683,566	0.2	621,742	0.2		0.0		0.0		0.0		0.0	61,824	0.4		0.0		0.0
5.	Incurred claims and cost containment expenses (Lines 3 and 4)	199,505,698	67.3	192,070,941	68.4	0	0.0	0	0.0	0	0.0	0	0.0	7,434,757	48.1	0	0.0	0	0.0
6.	Increase in contract reserves	(100)	0.0	(100)	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
7.	Commissions (a)	26,738,778	9.0	25,493,769	9.1		0.0		0.0		0.0		0.0	1,245,009	8.1		0.0		0.0
8.	Other general insurance expenses	27,557,011	9.3	25,064,664	8.9		0.0		0.0		0.0		0.0	2,492,347	16.1		0.0		0.0
9.	Taxes, licenses and fees	8,616,094	2.9	8,167,173	2.9		0.0		0.0		0.0		0.0	448,921	2.9		0.0		0.0
10.	Total other expenses incurred	62,911,883	21.2	58,725,606	20.9	0	0.0	0	0.0	0	0.0	0	0.0	4,186,277	27.1	0	0.0	0	0.0
11.	Aggregate write-ins for deductions	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
12.	Gain from underwriting before dividends or refunds	34,010,238	11.5	30,186,626	10.7	0	0.0	0	0.0	0	0.0	0	0.0	3,823,612	24.8	0	0.0	0	0.0
13.	Dividends or refunds	0	0.0		0.0		0.0		0.0		0.0		0.0	0	0.0		0.0		0.0
14.	Gain from underwriting after dividends or refunds	34,010,238	11.5	30,186,626	10.7	0	0.0	0	0.0	0	0.0	0	0.0	3,823,612	24.8	0	0.0	0	0.0
DETAILS OF WRITE-INS																			
1101.	.....																	
1102.	.....																	
1103.	.....																	
1198.	Summary of remaining write-ins for Line 11 from overflow page	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0
1199.	Totals (Lines 1101 through 1103 plus 1198) (Line 11 above)	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0	0	0.0

(a) Includes \$reported as "Contract, membership and other fees retained by agents."

SCHEDULE H - ACCIDENT AND HEALTH EXHIBIT (Continued)

	1	2	3	4	Other Individual Contracts				
					5	6	7	8	9
	Total	Group Accident and Health	Credit Accident and Health (Group and Individual)	Collectively Renewable	Non-Cancelable	Guaranteed Renewable	Non-Renewable for Stated Reasons Only	Other Accident Only	All Other
PART 2 - RESERVES AND LIABILITIES									
A. Premium Reserves:									
1. Unearned premiums	224,099						224,099		
2. Advance premiums	5,529,333	5,529,333							
3. Reserve for rate credits	0								
4. Total premium reserves, current year	5,753,432	5,529,333	0	0	0	0	224,099	0	0
5. Total premium reserves, prior year	7,853,630	7,687,831	0	0	0	0	165,799	0	0
6. Increase in total premium reserves	(2,100,198)	(2,158,498)	0	0	0	0	58,300	0	0
B. Contract Reserves:									
1. Additional reserves (a)	0								
2. Reserve for future contingent benefits	0								
3. Total contract reserves, current year	0	0	0	0	0	0	0	0	0
4. Total contract reserves, prior year	100	100	0	0	0	0	0	0	0
5. Increase in contract reserves	(100)	(100)	0	0	0	0	0	0	0
C. Claim Reserves and Liabilities:									
1. Total current year	15,657,544	15,210,962					446,582		
2. Total prior year	13,174,186	12,852,090	0	0	0	0	322,096	0	0
3. Increase	2,483,358	2,358,872	0	0	0	0	124,486	0	0

PART 3 - TEST OF PRIOR YEAR'S CLAIM RESERVES AND LIABILITIES									
1. Claims paid during the year:									
1.1 On claims incurred prior to current year	11,644,656	11,478,194				0	166,462		
1.2 On claims incurred during current year	184,694,118	177,612,133				0	7,081,985		
2. Claim reserves and liabilities, December 31, current year:									
2.1 On claims incurred prior to current year	626,156	623,130				0	3,026		
2.2 On claims incurred during current year	15,031,388	14,587,832				0	443,556		
3. Test:									
3.1 Line 1.1 and 2.1	12,270,812	12,101,324	0	0	0	0	169,488	0	0
3.2 Claim reserves and liabilities, December 31, prior year	13,174,186	12,852,090	0	0	0	0	322,096	0	0
3.3 Line 3.1 minus Line 3.2	(903,374)	(750,766)	0	0	0	0	(152,608)	0	0

PART 4 - REINSURANCE									
A. Reinsurance Assumed:									
1. Premiums written	0								
2. Premiums earned	0								
3. Incurred claims	0								
4. Commissions	0								
B. Reinsurance Ceded:									
1. Premiums written	46,263					46,263			
2. Premiums earned	46,263					46,263			
3. Incurred claims	227,566	227,566							
4. Commissions	0								

(a) Includes \$ premium deficiency reserve

SCHEDULE H - PART 5 - HEALTH CLAIMS

	1 Medical	2 Dental	3 Other	4 Total
A. Direct:				
1. Incurred Claims.....	227,566	198,822,132		199,049,698
2. Beginning claim reserves and liabilities.....	12,478	13,170,773	0	13,183,251
3. Ending claim reserves and liabilities.....	6,497	15,657,544		15,664,041
4. Claims paid	233,547	196,335,361	0	196,568,908
B. Assumed Reinsurance:				
5. Incurred Claims.....				0
6. Beginning claim reserves and liabilities.....	0	0	0	0
7. Ending claim reserves and liabilities.....				0
8. Claims paid	0	0	0	0
C. Ceded Reinsurance:				
9. Incurred Claims.....	227,566			227,566
10. Beginning claim reserves and liabilities.....	9,065	0	0	9,065
11. Ending claim reserves and liabilities.....	6,497			6,497
12. Claims paid	230,134	0	0	230,134
D. Net:				
13. Incurred Claims.....	0	198,822,132	0	198,822,132
14. Beginning claim reserves and liabilities.....	3,413	13,170,773	0	13,174,186
15. Ending claim reserves and liabilities.....	0	15,657,544	0	15,657,544
16. Claims paid.....	3,413	196,335,361	0	196,338,774
E. Net Incurred Claims and Containment Expenses:				
17. Incurred claims and containment expenses.....		199,505,698		199,505,698
18. Beginning reserves and liabilities.....	3,413	13,170,773	0	13,174,186
19. Ending reserves and liabilities.....		15,657,544		15,657,544
20. Paid claims and cost containment expenses	3,413	197,018,927	0	197,022,340

Schedule S - Part 1 - Section 1

NONE

Schedule S - Part 1 - Section 2

NONE

ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

SCHEDULE S - PART 2

Reinsurance Recoverable on Paid and Unpaid Losses Listed by Reinsuring Company as of December 31, Current Year

[illegible]

44

44

44

44

45

Reinsurance Ceded to Unauthorized Companies

[illegible]

SCHEDULE S - PART 5

Five Year Exhibit of Reinsurance Ceded Business (000 Omitted)					
	1 2008	2 2007	3 2006	4 2005	5 2004
A. OPERATIONS ITEMS					
1. Premiums and annuity considerations for life and accident and health contracts	9,513	10,076	10,790	11,688	12,667
2. Commissions and reinsurance expense allowances.....	0	0	0	0	0
3. Contract claims	20,840	25,245	20,698	19,549	21,508
4. Surrender benefits and withdrawals for life contracts		0	0	0	0
5. Dividends to policyholders		0	0	0	0
6. Reserve adjustments on reinsurance ceded	0	0	0	0	0
7. Increase in aggregate reserve for life and accident and health contracts		0	0	0	0
B. BALANCE SHEET ITEMS					
8. Premiums and annuity considerations for life and accident and health contracts deferred and uncollected	0	0	0	0	0
9. Aggregate reserves for life and accident and health contracts	204,142	209,691	217,785	224,157	227,058
10. Liability for deposit-type contracts	3,973	4,003	0	0	4,345
11. Contract claims unpaid	714	1,114	845	748	1,800
12. Amounts recoverable on reinsurance	0	0	0	0	0
13. Experience rating refunds due or unpaid		0	0	0	0
14. Policyholders' dividends (not included in Line 10).....		0	0	0	0
15. Commissions and reinsurance expense allowances unpaid		0	0	0	0
16. Unauthorized reinsurance offset	0	0	0	0	0
C. UNAUTHORIZED REINSURANCE (DEPOSITS BY AND FUNDS WITHHELD FROM)					
17. Funds deposited by and withheld from (F)	0	0	0	0	0
18. Letters of credit (L)	0	0	0	0	0
19. Trust agreements (T)	0	0	0	0	0
20. Other (O)	0	0	0	0	0

SCHEDULE S - PART 6

Restatement of Balance Sheet to Identify Net Credit For Ceded Reinsurance			
	1 As Reported (net of ceded)	2 Restatement Adjustments	3 Restated (gross of ceded)
ASSETS (Page 2, Col. 3)			
1. Cash and invested assets (Line 10)	90,020,694		90,020,694
2. Reinsurance (Line 14)	0	0	0
3. Premiums and considerations (Line 13)	1,650,489	0	1,650,489
4. Net credit for ceded reinsurance	XXX	204,856,069	204,856,069
5. All other admitted assets (balance)	2,237,848		2,237,848
6. Total assets excluding Separate Accounts (Line 24)	93,909,031	204,856,069	298,765,100
7. Separate Account assets (Line 25)	0		0
8. Total assets (Line 26)	93,909,031	204,856,069	298,765,100
LIABILITIES, CAPITAL AND SURPLUS (PAGE 3)			
9. Contract reserves (Lines 1 and 2)	225,099	204,142,188	204,367,287
10. Liability for deposit-type contracts (Line 3)	0		0
11. Claim reserves (Line 4)	15,656,544	713,881	16,370,425
12. Policyholder dividends/reserves (Lines 5 through 7)	0		0
13. Premium & annuity considerations received in advance (Line 8)	5,529,333	0	5,529,333
14. Other contract liabilities (Line 9)	449,922		449,922
15. Reinsurance in unauthorized companies (Line 24.2)	0	0	0
16. Funds held under reinsurance treaties with unauthorized reinsurers (Line 24.3)	0	0	0
17. All other liabilities (balance)	8,258,421		8,258,421
18. Total liabilities excluding Separate Accounts (Line 26)	30,119,319	204,856,069	234,975,388
19. Separate Account liabilities (Line 27)	0		0
20. Total liabilities (Line 28)	30,119,319	204,856,069	234,975,388
21. Capital & surplus (Line 38)	63,789,712	XXX	63,789,712
22. Total liabilities, capital & surplus (Line 39)	93,909,031	204,856,069	298,765,100
NET CREDIT FOR CEDED REINSURANCE			
23. Contract reserves	204,142,188		
24. Claim reserves	713,881		
25. Policyholder dividends/reserves	0		
26. Premium and annuity considerations received in advance	0		
27. Liability for deposit-type contracts.....	0		
28. Other contract liabilities	0		
29. Reinsurance ceded assets	0		
30. Other ceded reinsurance recoverables	0		
31. Total ceded reinsurance recoverables	204,856,069		
32. Premiums and considerations	0		
33. Reinsurance in unauthorized companies	0		
34. Funds held under reinsurance treaties with unauthorized reinsurers	0		
35. Other ceded reinsurance payables/offsets	0		
36. Total ceded reinsurance payable/offsets	0		
37. Total net credit for ceded reinsurance	204,856,069		

ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

SCHEDULE T – PART 2
INTERSTATE COMPACT – EXHIBIT OF PREMIUMS WRITTEN

Allocated by States and Territories

States, Etc.		Direct Business Only					
		1	2	3	4	5	6
		Life (Group and Individual)	Annuities (Group and Individual)	Disability Income (Group and Individual)	Long-Term Care (Group and Individual)	Deposit-Type Contracts	Totals
1. Alabama	AL	48,880	30,387			.0	79,267
2. Alaska	AK	2,401	40			.0	2,441
3. Arizona	AZ	37,998	9,531			.0	47,529
4. Arkansas	AR	26,584	17,982			.0	44,566
5. California	CA	273,286	89,799			.0	363,085
6. Colorado	CO	26,609	17,158			.0	43,767
7. Connecticut	CT	10,960	6,145			.0	17,105
8. Delaware	DE	12,679	6,477			.0	19,156
9. District of Columbia	DC	86,382	12,512			.0	98,894
10. Florida	FL	466,122	107,183			.0	573,305
11. Georgia	GA	134,833	39,266			.0	174,099
12. Hawaii	HI	2,698	65,669			.0	68,367
13. Idaho	ID	2,661	1,210			.0	3,871
14. Illinois	IL	266,209	159,603			.0	425,812
15. Indiana	IN	260,373	35,831			.0	296,204
16. Iowa	IA	21,188	11,010			.0	32,198
17. Kansas	KS	4,944	13,358			.0	18,302
18. Kentucky	KY	55,881	23,972			.0	79,853
19. Louisiana	LA	30,376	5,017			.0	35,393
20. Maine	ME	2,885	2,250			.0	5,135
21. Maryland	MD	834,184	462,916			.0	1,297,100
22. Massachusetts	MA	227,909	63,604			.0	291,513
23. Michigan	MI	436,571	121,359			.0	557,930
24. Minnesota	MN	124,087	5,819			.0	129,906
25. Mississippi	MS	26,252	4,661			.0	30,913
26. Missouri	MO	27,679	33,548			.0	61,227
27. Montana	MT	4,805	880			.0	5,685
28. Nebraska	NE	16,907	5,656			.0	22,563
29. Nevada	NV	17,101	2,011			.0	19,112
30. New Hampshire	NH	28,305	8,544			.0	36,849
31. New Jersey	NJ	394,813	155,402			.0	550,215
32. New Mexico	NM	4,504	1,014			.0	5,518
33. New York	NY	25,612	9,454			.0	35,066
34. North Carolina	NC	189,929	32,944			.0	222,873
35. North Dakota	ND	439	.0			.0	439
36. Ohio	OH	970,708	305,457			.0	1,276,165
37. Oklahoma	OK	4,345	2,093			.0	6,438
38. Oregon	OR	8,554	517			.0	9,071
39. Pennsylvania	PA	370,863	241,561			.0	612,424
40. Rhode Island	RI	7,686	2,990			.0	10,676
41. South Carolina	SC	49,793	19,376			.0	69,169
42. South Dakota	SD	6,255	295			.0	6,550
43. Tennessee	TN	63,247	25,385			.0	88,632
44. Texas	TX	111,693	99,874			.0	211,567
45. Utah	UT	16,195	4,225			.0	20,420
46. Vermont	VT	2,034	1,232			.0	3,266
47. Virginia	VA	134,840	53,034			.0	187,874
48. Washington	WA	10,252	2,258			.0	12,510
49. West Virginia	WV	14,554	3,251			.0	17,805
50. Wisconsin	WI	820,115	183,202			.0	1,003,317
51. Wyoming	WY	4,312	195			.0	4,507
52. American Samoa	AS	.0	.0			.0	.0
53. Guam	GU	.0	.0			.0	.0
54. Puerto Rico	PR	184	.0			.0	184
55. U.S. Virgin Islands	VI	.0	.0			.0	.0
56. Northern Mariana Islands	MP	.0	.0			.0	.0
57. Canada	CN	416	255			.0	671
58. Aggregate Other Alien	OT	5,775	298			.0	6,073
59. Totals		6,734,867	2,507,710	0	0	0	9,242,577

SCHEDULE Y
PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
69671	61-1041514	Humana Health Ins Comp of Florida, Inc		15,000,000			(5,750,818)	99,750,004			108,999,186	
00000	61-1343508	Humana Marketpoint, Inc					303,366,458				303,366,458	
00000	61-1241225	Hum Military Healthcare Services, Inc					(42,273,435)				(42,273,435)	
95270	61-1103898	Humana Medical Plan, Inc	(145,000,000)	(2,000,000)			(383,692,657)	(99,750,004)			(630,442,661)	
95885	61-1013183	Humana Health Plan, Inc		225,000,000			(165,809,458)	(90,585,806)			(31,395,264)	
95348	31-1154200	Humana Health Plan of Ohio, Inc	(15,000,000)				(2,106,514)	(213,372,211)			(230,478,725)	
95024	61-0994632	Humana Health Plan of Texas, Inc	(40,000,000)				(44,097,659)	(208,668,875)			(292,766,534)	
54739	52-1157181	The Dental Concern, Inc	(1,000,000)				(639,543)				(1,639,543)	
00000	61-0647538	Humana Inc	296,000,000	(467,750,000)			1,817,205,744				1,645,455,744	
00000	61-1232669	Managed Care Indemnity, Inc	(15,000,000)				(9,474)				(15,009,474)	
00000	61-1223418	Health Value Management, Inc					(21,859,375)				(21,859,375)	
95342	39-1525003	Hum Wisconsin Health Org Ins Corp		20,000,000			(7,484,781)	(59,145,691)			(46,630,472)	
73288	39-1263473	Humana Insurance Company	70,000,000				(1,179,916,696)	657,861,402			(452,055,294)	
52028	39-3654697	The Dental Concern, Ltd	(1,000,000)				(62,700)				(1,062,700)	
95519	58-2209549	Hum Employers Health Plan of GA, Inc					(7,796,664)	(86,088,819)			(93,885,483)	
70580	39-0714280	HumanaDental Insurance Company	(25,000,000)				(22,385,055)				(47,385,055)	
88595	31-0935772	Emphesys Insurance Company		750,000			(267,241)				482,759	
60219	61-1311605	Humana Insurance Company of Kentucky					(3,151,413)				(3,151,413)	
00000	66-0291866	PCA Insurance Group of Puerto Rico, Inc					(414,967)				(414,967)	
00000	66-0406896	PCA Health Plans of Puerto Rico, Inc					(6,110,374)				(6,110,374)	
95642	72-1279235	Humana Health Benefit Plan of LA, Inc	(70,000,000)				(100,487,268)				(170,487,268)	
95092	59-2598550	CarePlus Health Plans, Inc	(54,000,000)				(25,452,513)				(79,452,513)	
00000	20-2888723	Humana Insurance Company of New York					(9,319,698)				(9,319,698)	
95158	61-1279717	CHA HMO					(2,348,898)				(2,348,898)	
00000	61-1383567	HUM-e-FL, Inc									.0	
00000	20-3364857	Humana MarketPOINT of Puerto Rico, Inc					(1,672)				(1,672)	
00000	AA-5893028	Humana Health Ent. UK Ltd									.0	
00000	26-0010657	CAC-Florida Medical Centers, LLC					(12,621,776)				(12,621,776)	
00000	61-1316926	Humana Pharmacy, Inc									.0	
00000	61-1343791	Humana Innovation Enterprises, Inc									.0	
00000	20-2620891	Green Ribbon Health, LLC									.0	
00000	75-2043865	Corphealth, Inc									.0	
00000	20-1377270	KMG America Corporation		205,000,000							205,000,000	
65110	57-0380426	Kanawha Insurance Co					(1,819,161)				(1,819,161)	
00000	74-2352809	Texas Dental Plans, Inc									.0	
12908	20-8411422	Humana Medical Plan of Utah		2,000,000			(500,049)				1,499,951	
95107	56-1796975	American Dental Plan of NC					(152,893)				(152,893)	
11559	58-2302163	American Dental Providers of AR					(42,257)				(42,257)	
12250	63-1063101	CompBenefits of Alabama					(120,749)				(120,749)	
52015	59-2531815	CompBenefits Company					(42,853,177)				(42,853,177)	
95161	76-0039628	DentiCare, Inc					(2,780,501)				(2,780,501)	
11228	36-3686002	CompBenefits Dental, Inc					(4,315,007)				(4,315,007)	
60052	37-1326199	Humana Benefit Plan of Illinois					(1,820,155)				(1,820,155)	
10126	65-1137990	Humana AdvantageCare Plan		2,000,000			(41,632)				1,958,368	
95754	62-1579044	Cariten Health Plan					(3,509,844)				(3,509,844)	
82740	62-0729865	Cariten Insurance Company					(282,469)				(282,469)	
95749	62-1546662	Preferred Health Partnership of TN, Inc					215,354				215,354	
60984	74-2552026	CompBenefits Insurance Company					(18,489,013)				(18,489,013)	

SCHEDULE Y
PART 2 - SUMMARY OF INSURER’S TRANSACTIONS WITH ANY AFFILIATES

1	2	3	4	5	6	7	8	9	10	11	12	13
NAIC Company Code	Federal ID Number	Names of Insurers and Parent, Subsidiaries or Affiliates	Shareholder Dividends	Capital Contributions	Purchases, Sales or Exchanges of Loans, Securities, Real Estate, Mortgage Loans or Other Investments	Income/ (Disbursements) Incurred in Connection with Guarantees or Undertakings for the Benefit of any Affiliate(s)	Management Agreements and Service Contracts	Income/ (Disbursements) Incurred Under Reinsurance Agreements	*	Any Other Material Activity Not in the Ordinary Course of the Insurer's Business	Totals	Reinsurance Recoverable/ (Payable) on Losses and/or Reserve Credit Taken/(Liability)
9999999 Control Totals			0	0	0	0	0	0	XXX	0	0	0

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

The following supplemental reports are required to be filed as part of your statement filing unless specifically waived by the domiciliary state. However, in the event that your domiciliary state waives the filing requirement, your response of **WAIVED** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

	Responses
1. Will the Supplemental Compensation Exhibit be filed with the state of domicile by March 1?	.....YES.....
2. Will the confidential Risk-based Capital Report be filed with the NAIC by March 1?	.....YES.....
3. Will the confidential Risk-based Capital Report be filed with the state of domicile, if required, by March 1?	.....YES.....
4. Will an actuarial opinion be filed by March 1?	.....YES.....

APRIL FILING

5. Will Management's Discussion and Analysis be filed by April 1?	.....YES.....
6. Will the Life, Health & Annuity Guaranty Association Model Act Assessment Base Reconciliation Exhibit be filed with the state of domicile and the NAIC by April 1?	.....YES.....
7. Will the Adjustment Form (if required) be filed with the state of domicile and the NAIC by April 1?	.....YES.....
8. Will the Supplemental Investment Risks Interrogatories be filed by April 1?YES.....

JUNE FILING

9. Will an audited financial report be filed by June 1?YES.....
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The following supplemental reports are required to be filed as part of your annual statement filing. However, in the event that your company does not transact the type of business for which the special report must be filed, your response of **NO** to the specific interrogatory will be accepted in lieu of filing a "NONE" report and a bar code will be printed below. If the supplement is required of your company but is not being filed for whatever reason enter **SEE EXPLANATION** and provide an explanation following the interrogatory questions.

MARCH FILING

10. Will Schedule SIS (Stockholder Information Supplement) be filed with the state of domicile by March 1?	.....NO.....
11. Will the Medicare Supplement Insurance Experience Exhibit be filed with the state of domicile and the NAIC by March 1?	.....NO.....
12. Will the Trusteed Surplus Statement be filed with the state of domicile and the NAIC by March 1?	.....NO.....
13. Will the actuarial opinion on participating and non-participating policies as required in Interrogatories 1 and 2 to Exhibit 5 be filed by March 1?	.....YES.....
14. Will the actuarial opinion on non-guaranteed elements as required in interrogatory #3 to Exhibit 5 be filed by March 1?	.....YES.....
15. Will the actuarial opinion on X-Factors be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
16. Will the actuarial opinion on Separate Accounts Funding Guaranteed Minimum Benefit be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
17. Will the actuarial opinion on Synthetic Guaranteed Investment Contracts be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
18. Will the Reasonableness of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
19. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXV be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
20. Will the Reasonableness of Assumptions Certification for Implied Guaranteed Rate Method required by Actuarial Guideline XXXVI be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
21. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Average Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
22. Will the Reasonableness and Consistency of Assumptions Certification required by Actuarial Guideline XXXVI (Updated Market Value) be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
23. Will the C-3 RBC Certifications required under C-3 Phase I be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
24. Will the C-3 RBC Certifications required under C-3 Phase II be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
25. Will the Actuarial Certifications Related to Annuity Nonforfeiture Ongoing Compliance for Equity Indexed Annuities be filed with the state of domicile and electronically with the NAIC by March 1?	.....YES.....
26. Will the Workers' Compensation Carve-Out Supplement be filed by March 1?	.....NO.....

SUPPLEMENTAL EXHIBITS AND SCHEDULES INTERROGATORIES

27. Will Supplemental Schedule O be filed with the state of domicile and the NAIC by March 1?YES.....

28. Will the Medicare Part D Coverage Supplement be filed with the state of domicile and the NAIC by March 1?NO.....

APRIL FILING

29. Will the Long-Term Care Experience Reporting Forms be filed with the state of domicile and the NAIC by April 1?NO.....

30. Will the Interest-Sensitive Life Insurance Products Report Forms be filed with the state of domicile and the NAIC by April 1?NO.....

31. Will the Credit Insurance Experience Exhibit be filed with the state of domicile and the NAIC by April 1?NO.....

32. Will the Accident and Health Policy Experience Exhibit be filed by April 1?YES.....

EXPLANATIONS:

10.This type of business is not written

11.This type of business is not written

12.This type of business is not written

26.This type of business is not written

28.This type of business is not written

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BAR CODE:

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ANNUAL STATEMENT FOR THE YEAR 2008 OF THE HumanaDental Insurance Company

SCHEDULE O SUPPLEMENT

FOR THE YEAR ENDED DECEMBER 31, 2008

(To Be Filed By March 1)

Of The HumanaDental Insurance Company
Address (City, State and Zip Code) DePere, WI 54115
NAIC Group Code 0119 NAIC Company Code 70580 Employer's ID Number 39-0714280

SUPPLEMENTAL SCHEDULE O – PART 1

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid Policyholders				
	1 2004	2 2005	3 2006	4 2007	5 2008(a)
1. Prior	.0	.0	.0	.0	.0
2. 2004	.0	.0	.0	.1	.0
3. 2005	.xxx	1,081	101	243	.4
4. 2006	.xxx	.xxx	1,468	13,901	188
5. 2007	.xxx	.xxx	.xxx	175,192	11,287
6. 2008	.xxx	.xxx	.xxx	.xxx	177,612

Section B - Other Accident and Health

1. Prior	9,831	.48	.0	.0	.0
2. 2004	124,358	13,955	.68	.0	.0
3. 2005	.xxx	153,360	16,515	.0	.0
4. 2006	.xxx	.xxx	177,099	.177	.0
5. 2007	.xxx	.xxx	.xxx	18,196	.167
6. 2008	.xxx	.xxx	.xxx	.xxx	7,082

Section C - Credit Accident and Health

1. Prior	.0	.0	.0	.0	
2. 2004	.0				
3. 2005	.xxx	.0	.0	.0	
4. 2006	.xxx	.xxx	.0	.0	
5. 2007	.xxx	.xxx	.xxx	.0	
6. 2008	.xxx	.xxx	.xxx	.xxx	

Section D -

1. Prior	.0	.0	.0	.0	
2. 2004	.0				
3. 2005	.xxx	.0	.0	.0	
4. 2006	.xxx	.xxx	.0	.0	
5. 2007	.xxx	.xxx	.xxx	.0	
6. 2008	.xxx	.xxx	.xxx	.xxx	

Section E -

1. Prior	.0	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	.xxx	.0	.0	.0	
4. 2006	.xxx	.xxx	.0	.0	
5. 2007	.xxx	.xxx	.xxx	.0	
6. 2008	.xxx	.xxx	.xxx	.xxx	

Section F-

1. Prior	.0	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	.xxx	.0	.0	.0	
4. 2006	.xxx	.xxx	.0	.0	
5. 2007	.xxx	.xxx	.xxx	.0	
6. 2008	.xxx	.xxx	.xxx	.xxx	

Section G-

1. Prior	.0	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	.xxx	.0	.0	.0	
4. 2006	.xxx	.xxx	.0	.0	
5. 2007	.xxx	.xxx	.xxx	.0	
6. 2008	.xxx	.xxx	.xxx	.xxx	

(a) See Paragraph 9 of the Annual Audited Financial Reports in the General section of the annual statement instructions.

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 2

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Net Amounts Paid for Cost Containment Expenses				
	1 2004	2 2005	3 2006	4 2007	5 2008
1. Prior	XXX	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	XXX	2	.0	.0	
4. 2006	XXX	XXX	.7	.0	
5. 2007	XXX	XXX	XXX	1,183	
6. 2008	XXX	XXX	XXX	XXX	622

Section B - Other Accident and Health

1. Prior	XXX	.0	.0	.0	
2. 2004	1,395	.0	.0	.0	
3. 2005	XXX	1,836	.0	.0	
4. 2006	XXX	XXX	1,213	.0	
5. 2007	XXX	XXX	XXX	61	
6. 2008	XXX	XXX	XXX	XXX	62

Section C - Credit Accident and Health

1. Prior	XXX	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	XXX	.0	.0	.0	
4. 2006	XXX	XXX	.0	.0	
5. 2007	XXX	XXX	XXX	.0	
6. 2008	XXX	XXX	XXX	XXX	

Section D-

1. Prior	XXX	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	XXX	.0	.0	.0	
4. 2006	XXX	XXX	.0	.0	
5. 2007	XXX	XXX	XXX	.0	
6. 2008	XXX	XXX	XXX	XXX	

Section E-

1. Prior	XXX	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	XXX	.0	.0	.0	
4. 2006	XXX	XXX	.0	.0	
5. 2007	XXX	XXX	XXX	.0	
6. 2008	XXX	XXX	XXX	XXX	

Section F-

1. Prior	XXX	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	XXX	.0	.0	.0	
4. 2006	XXX	XXX	.0	.0	
5. 2007	XXX	XXX	XXX	.0	
6. 2008	XXX	XXX	XXX	XXX	

Section G-

1. Prior	XXX	.0	.0	.0	
2. 2004	.0	.0	.0	.0	
3. 2005	XXX	.0	.0	.0	
4. 2006	XXX	XXX	.0	.0	
5. 2007	XXX	XXX	XXX	.0	
6. 2008	XXX	XXX	XXX	XXX	

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 3

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Cumulative Net Amount Paid Policyholders and Claim Liability and Reserve Outstanding at End of Year				
	1 2004	2 2005	3 2006	4 2007	5 2008
1. 2004 .....	.0	.0	.0	XXX	XXX
2. 2005	XXX	1,964	1,194	171,003	XXX
3. 2006	XXX	XXX	1,918	191,004	168,448
4. 2007	XXX	XXX	XXX	187,851	186,933
5. 2008	XXX	XXX	XXX	XXX	178,235

Section B - Other Accident and Health

1. 2004	139,327	138,372	138,382	XXX	XXX
2. 2005	XXX	171,549	168,928	298	XXX
3. 2006	XXX	XXX	191,332	1,835	1,833
4. 2007	XXX	XXX	XXX	18,517	18,366
5. 2008	XXX	XXX	XXX	XXX	7,085

Section C - Credit Accident and Health

1. 2004 .....	.0	.0	.0	XXX	XXX
2. 2005	XXX	.0	.0	.0	XXX
3. 2006	XXX	XXX	.0	.0	.0
4. 2007	XXX	XXX	XXX	.0	.0
5. 2008	XXX	XXX	XXX	XXX	.0

Section D-

1. 2004 .....	.0	.0	.0	XXX	XXX
2. 2005	XXX	.0	.0	.0	XXX
3. 2006	XXX	XXX	.0	.0	.0
4. 2007	XXX	XXX	XXX	.0	.0
5. 2008	XXX	XXX	XXX	XXX	.0

Section E-

1. 2004 .....	.0	.0	.0	XXX	XXX
2. 2005	XXX	.0	.0	.0	XXX
3. 2006	XXX	XXX	.0	.0	.0
4. 2007	XXX	XXX	XXX	.0	.0
5. 2008	XXX	XXX	XXX	XXX	.0

Section F-

1. 2004 .....	.0	.0	.0	XXX	XXX
2. 2005	XXX	.0	.0	.0	XXX
3. 2006	XXX	XXX	.0	.0	.0
4. 2007	XXX	XXX	XXX	.0	.0
5. 2008	XXX	XXX	XXX	XXX	.0

Section G-

1. 2004 .....	.0	.0	.0	XXX	XXX
2. 2005	XXX	.0	.0	.0	XXX
3. 2006	XXX	XXX	.0	.0	.0
4. 2007	XXX	XXX	XXX	.0	.0
5. 2008	XXX	XXX	XXX	XXX	.0

SCHEDULE O SUPPLEMENT
SUPPLEMENTAL SCHEDULE O – PART 4

Development of Incurred Losses
(\$000 OMITTED)

Section A - Group Accident and Health

Year in Which Losses Were Incurred	Sum of Net Cumulative Amount Paid Policyholders, Cost Containment Expenses, and Claim and Cost Containment Liability and Reserve Outstanding at the End of Year				
	1 2004	2 2005	3 2006	4 2007	5 2008
1. 2004.....	.0	.0	.0	.0	114,680
2. 2005.....	XXX	1,966	1,194	171,003	138,564
3. 2006.....	XXX	XXX	1,925	191,004	168,636
4. 2007.....	XXX	XXX	XXX	189,034	198,220
5. 2008.....	XXX	XXX	XXX	XXX	178,857

Section B – Other Accident and Health

1. 2004.....	140,722	.0	138,382	.0	
2. 2005.....	XXX	174,430	168,928	298	297
3. 2006.....	XXX	XXX	192,545	1,835	1,833
4. 2007.....	XXX	XXX	XXX	18,578	18,533
5. 2008.....	XXX	XXX	XXX	XXX	13,491

Section C - Credit Accident and Health

1. 2004.....	.0	.0	.0	.0	
2. 2005.....	XXX	.0	.0	.0	
3. 2006.....	XXX	XXX	.0	.0	
4. 2007.....	XXX	XXX	XXX	.0	
5. 2008.....	XXX	XXX	XXX	XXX	

Section D-

1. 2004.....	.0	.0	.0	.0	
2. 2005.....	XXX	.0	.0	.0	
3. 2006.....	XXX	XXX	.0	.0	
4. 2007.....	XXX	XXX	XXX	.0	
5. 2008.....	XXX	XXX	XXX	XXX	

Section E-

1. 2004.....	.0	.0	.0	.0	
2. 2005.....	XXX	.0	.0	.0	
3. 2006.....	XXX	XXX	.0	.0	
4. 2007.....	XXX	XXX	XXX	.0	
5. 2008.....	XXX	XXX	XXX	XXX	

Section F-

1. 2004.....	.0	.0	.0	.0	
2. 2005.....	XXX	.0	.0	.0	
3. 2006.....	XXX	XXX	.0	.0	
4. 2007.....	XXX	XXX	XXX	.0	
5. 2008.....	XXX	XXX	XXX	XXX	

Section G-

1. 2004.....	.0	.0	.0	.0	
2. 2005.....	XXX	.0	.0	.0	
3. 2006.....	XXX	XXX	.0	.0	
4. 2007.....	XXX	XXX	XXX	.0	
5. 2008.....	XXX	XXX	XXX	XXX	

SUPPLEMENTAL SCHEDULE O - PART 5

(\$000 OMITTED)

Reserve and Liability Methodology - Exhibits 6 and 8

Line of Business	1 Methodology	2 Amount
1. Industrial Life		
2. Ordinary Life		
3. Individual Annuity		
4. Supplementary Contracts		
5. Credit Life		
6. Group Life		
7. Group Annuities.....	Deve lopement.....	15,211
8. Group Accident and Health		
9. Credit Accident and Health	Deve lopement.....	447
10. Other Accident and Health		
11. Total		15,658

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(http://www.naic.org/committees_e_app_blanks.htm)

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